|  |  |
| --- | --- |
| C:\Users\AriLangfor\Desktop\logowqm-glow5.png | Western Quarterly Meeting  *of the Religious Society of Friends* |

# Property Data (Please fill out one sheet per property or building)

## General Information

|  |  |  |  |
| --- | --- | --- | --- |
| Monthly Meeting: |  |  |  |
|  |  |  |  |

|  |  |  |
| --- | --- | --- |
| Address: |  |  |
|  | Street Address |  |

|  |  |  |  |
| --- | --- | --- | --- |
|  |  |  |  |
|  | City | State | ZIP Code |

|  |  |  |  |
| --- | --- | --- | --- |
| Contact Name: |  | Contact Phone: |  |

|  |  |
| --- | --- |
| Contact Email |  |
| Property Name: |  |

|  |  |
| --- | --- |
| Property Type (Meetinghouse, Burial Ground, Tenant House, etc.): |  |

|  |  |
| --- | --- |
| Property Address: | (If different from above) |

|  |  |
| --- | --- |
| Description of Property or Building: |  |

## Legal Information

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name(s) on Deed: |  | | | |
| Committee or Trustees group: |  | | | |
| Clerk or Contact: |  | | | |
| Phone: |  | Email: |  | |
| Current Location of Deed: |  | | | |
| Deed Restrictions |  | | | |
| Property Incorporated? If so, how? |  | | | |
| Property Insurance Company & Policy |  | | | |
| Name & Location of Investment Funds |  | | | |
| Who administers these funds? |  | | | |
| Name & Location of Bank Account |  | | | |
| Who administers? |  | | | |
| Additional Information | | | |
| Are upgrades or major repairs needed or planned for this property? If so, please explain. | | | |
|  | | | |
|  | | | |
|  | | | |
|  | | | |

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| Are there any challenges with maintaining this property you would like to share? Any topics that might be appropriate for conversations with others in the Quarter? |
|  |
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| Please provide additional information you believe to be pertinent to this property. |
|  |
|  |
|  |

Thank you very much for your efforts in completing this information!

We hope it will be helpful to your Monthly Meeting or Property Committee as well as providing valuable historical information to the Quarter.

Please return forms, completed as best as you are able, to the Western Quarter Office by email: [coordinator@westernquarterquakers.org](mailto:coordinator@westernquarterquakers.org). Or mail a paper copy to Western Quarter, P.O. Box 693, Kennett Square, PA 19348

If you later find more information than what you originally were able to collect, please forward it as it comes available. It is our hope that we might be able to help Monthly Meetings in locating missing information as well.