

Cambridge Community Management, LLC

2509 Valley Avenue

Winchester, VA 22601

Office: (540) 662-2300, Fax: (540) 722-2225

Email: info@cambridgeman.com

RE-SALE DISCLOSURE PACKAGE ORDER FORM

 Pickup paper copy \$211.00 *Allow 14 Days for processing – picked up in our office

 Electronic \$176.00 *Allow 14 Days for processing – Email address: _____

 Mailed \$211.00 plus applicable mailing fees *Allow 14 Days for delivery ** contact Cambridge to ensure service is available

 Add RUSH PROCESSING \$70.00 (Within 5 business days) - ** Must contact Cambridge to ensure service is available

XX Transfer Fee \$70.00 * (is charged to the New Owner)

 Cap Fee for new construction

XX Inspection Fee of \$141.00 *(not optional)

Total Fees Above: \$ _____

Payment Information: _____ (Choose one) At time of Settlement _____ In Person _____

**Note: If payment is not collected at time of settlement, then the undersigned WILL be responsible for final payment if not paid within 90 days of order.*

ASSOCIATION: _____ PROPERTY ADDRESS: _____

SELLER'S NAME/CONTACT NUMBER: _____

SELLER'S AGENT NAME/NUMBER: _____

BUYER'S NAME AND PHONE NUMBER: _____

BUYER'S AGENT NAME/NUMBER: _____

ALL SETTLEMENT AGENCIES NAMES/NUMBERS _____

SETTLEMENT DATE: _____

As owner or Agent for Owner of above property, I hereby request a resale disclosure package in accordance with The Virginia Property Owner's Association Act. I understand that in accordance with same the allowable time frame is fourteen (14) days for preparation and delivery of resale disclosure package. The process begins upon receipt of **a fully completed** written request (no missing information). I also understand and agree that if payment is to be made at settlement and settlement does not occur within 90 days the owner of the property or his/her agent below will be liable for the above charges.

Requested by: _____ Date: _____

Please know that failure to provide all the info above could lead to delays in delivery of the package – information is vital to ensure proper transfer of property and recordkeeping.

OFFICE USE ONLY: Method of Delivery
Pick Up/Mailed/Emailed

Delivery Signature: _____

Date of delivery: _____

Printed Name: _____