



For office use only:
 Received on: _____
 By: _____

CONDOMINIUM RESALE DISCLOSURE PACKET REQUEST FORM

Property Owner(s): Mr. /Mrs. /Ms. _____

Property Address: _____

Requested By: Owner: _____ Agent: _____ (If requested by Agent, please enter company information below)

Company Name: _____ Contact Name: _____

Address: _____

Telephone: _____ Email: _____

Settlement Attorney/Title Company: _____

Address: _____

Telephone: _____ Email: _____

HOW WOULD YOU LIKE TO RECEIVE THE DISCLOSURE PACKET?

(Please check the appropriate box)

_____ **Electronic (emailed) – list recipients name & email address:**

_____ **Hardcopy – /my authorized agent will pick it up**

_____ **Hardcopy – shipped, list recipients name & mailing address:**

Stone Ridge Association is not responsible for spam filters or other blocking mechanisms on external customers' email systems that may prevent the Electronic Disclosure Documents email from reaching the intended recipient. If email is not received after 14 days please contact stoneridge-hoa@stoneridgeinc.org for assistance.

RESALE DISCLOSURE PACKET FEE SCHEDULE

Electronic Package Options:

_____ \$100 Paid at time of request

OR

Hardcopy Package Options

_____ \$125 Paid at time of request _____ 2nd copy (free) _____ 3rd copy (\$25)

_____ \$125 Paid at settlement

_____ \$150 Paid at Settlement _____ 2nd copy (free) _____ 3rd copy (\$25)

_____ \$11.05 Shipping cost *per copy* (if applicable)

\$ _____ Total Resale Fees Due to Stone Ridge Association at Settlement

Payment at time of request receives a \$25.00 discount. Payment must be received with this request form to be eligible. Cash or check only.

I, _____ hereby request resale disclosure information about Stone Ridge Association according to the terms of the Virginia Property Owners Association Act (POAA). **The POAA requires Stone Ridge Association to release the documents ONLY to the Owner or his/her authorized agent.** If the undersigned is an agent of the owner, please attach to this form the Owner's letter of authorization, a copy of the realtor contract or Power of Attorney.

The Disclosure Documents will be available for pick-up fourteen (14) days after the request has been received. If the "ready date" falls on a Saturday, the Disclosure Documents will be available for pick-up the preceding Friday. The resale packet is valid for one year from today's date. Updates may be requested and will be provided per POAA requirements.

Signature of Requestor: _____ Date: _____

By signing above I certify that all information listed above is correct and I understand that no refunds will be issued once my request is processed.

Received By: _____ Date: _____

Print Name

Signature