# Breezewood II Condominiums Homeowner's Association, Inc.

#### **Breakdown of Dues Paid**

The information provided below is not meant to cover all aspects of the *Breezewood II Homeowner Association* Covenants, but the Board has provided below a summary of what benefits *Breezewood II Homeowner Association* homeowners receive from paying HOA dues. *Breezewood II Homeowner Association* Board of Directors encourages you to read the covenants thoroughly and become active in the association by participating in annual meetings and serving on boards. If you have any further questions about the covenants, consult your attorney, the Property Management Company or Breezewood II Board members. It is the responsibility of the *Breezewood II Homeowner Association* Board of Directors to establish a budget to cover the expenses of the association and prioritize/approve how dues spent on the behalf of the HOA and its members.

#### **HOA Information Sheet**

A. Dues: \$193 per month (eff. 4.1.24)

Dues Due: First Day of the month

Draft Date: 17<sup>th</sup> Day of the Month

Late on the 21st Day of the Month Late Fee: 1.5% of

unpaid charges

Dues Cover: General Liability Insurance

Hazard Insurance on Buildings Building and Parking

Lot Lighting Water and Sewer Service

External Building Maintenance Common Area Maintenance Common Area Landscaping Termite

Inspections (Annual)

Pest Control (Quarterly and on Call service) Management Fees

- B. Landscaping: Little's Nursery
- C. Termite/Pest Control: Clegg's Termite and Pest Management (252)752-5175; Call the pest control company directly to schedule a time for treating the interior of your home, as needed.

HOA manager is Freedom Edmundson
All concerns and maintenance requests should be emailed to <a href="mailto:freedom@russellpm.com">freedom@russellpm.com</a> or you may call 252.329.7368.

#### Breezewood II Homeowner Association

106 Regency Blvd Greenville, NC 27834 Phone: 252.329.7368 Fax: 252.355.9641

www.russellpm.com

### **Homeowners Association Information Sheet**

Property Address:		
Homeowner's Name:		Spouse or Co
Owner's Name:		
Owner's Mailing Address:		
Telephone:	(Home)	
	(Work)	
	(Cell)	
Email Address:		

PLEASE MAIL OR FAX TO US ASAP!
THANK YOU FOR YOUR TIME AND COOPERATION!

## **Russell Property Management**

106 Regency Blvd Greenville, NC 27834

Phone: 252.329.7368/ Fax: 252.355.9641

#### Homeowners Association TENANT Information Sheet

Homeowners Association: _		
Owner's Name and Mailing		
Property Address:		
Tenant's Name:		
Tenant's Contact Informatio	n:	
	(Home)	(Work)
	(Cell)	(Email)
Tenant Vehicle Information:		
Make and model		•
License Plate		

If you have multiple tenants in one unit, please list information for all persons.

It is very important that we get this information for your benefit in case of an emergency. We ask that you update us each time a new tenant moves in. This is general information needed by your homeowners association and will be filed in your personal file in the homeowners association department of Russell Property Management.

PLEASE MAIL OR EMAIL OR FAX TO US ASAP! THANK YOU FOR YOUR TIME.

## Russell Property Management, Inc.

106 Regency Blvd Greenville, NC 27834

Phone: 252.329.7368 Fax: 252.355.9641

## **Bank Draft Authorization**

Home Address		City		State	Zip
		·			1
(Mailing Address for unit	(If different than add	ress above)	City	State	Zip
	Draft Payable t	o (HOA nam	e)		
Day of Month for Dra	ft		Amou	nt to be Dra	afted
Draft Frequency (circle on	e)Monthly_	Quar	erly	Annua	al
Contact Phone Number					
Please note:					
** HOA dues will *** The HOA will o	e increased, your dra be drafted approximal draft the account bala I NOT draft for spec e per draft for this se	ately 5 days l ince. ial assessmen	pefore y	our associa	
Bank Name:					
Account Holder Name: _					
Routing #:					
Account #:	Chaolaina		Carrina	2	
Account Type:	Checking		Saving	S	
	Signature				Date

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## **Credit/Debit Card Draft Authorization**

I,	, hereby a	lanagement to		
draft my HOA dues for the street addre	ess			
Home Address	City	State	Zip	-
Draft F	Payable to (HOA name)			-
Day of Month for Draft	A	mount to be D	rafted	
Draft Frequency (circle one)M	onthlyQuarterly	yAnr	nual Contact	Phone Number _
Please note:				
* If HOA dues are increased,  ** HOA dues will be drafted a  *** The HOA will draft the acco  **** Drafts will NOT draft for sp  **** There is a 3.0% fee per draft	pproximately 5 days before bount balance. pecial assessments (if apprecial assessments)	ore your associ		ay.
Account Holder Name:				
Card Billing Address	City	State	Zip	-
Account #:				
Expiration Date:	_ Security Code:			
Signature		Date		