

***Davencroft Village Homeowner's Association, Inc.***

106 Regency Blvd.  
Greenville, NC 27834

Phone: 252.329.7368 Fax: 252.355.9641

[www.russellpm.com](http://www.russellpm.com)

**Homeowner Information Sheet**

**A. 42 lots**

**B. DUES: \$186.00 per year**

Due Date: January 1

Late: If not received by Feb 1, late fee of \$1/month applies

Dues Include: Entrance and Common Area Landscaping and Maintenance

Rules Enforcement

Association Management

Director-Officer/ General Liability Insurance

**C. Landscaping: Pirate Lawn Enforcement**

Landscaper only maintains the entrance areas of the subdivision. Owners are responsible for maintaining the landscaping for their individual homes.

**ALL CONCERNS MUST BE PLACED IN WRITING (UNLESS EMERGENCY)**

The HOA manager is Amber Whittington.

All concerns and maintenance requests should be emailed to [amber@russellpm.com](mailto:amber@russellpm.com) or you may call 252.329.7368

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**Homeowners Association Information Sheet**

Property Address: \_\_\_\_\_

Owner's Name: \_\_\_\_\_

Spouse or Co-Owner's Name: \_\_\_\_\_

Owner's Mailing Address:

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Telephone: \_\_\_\_\_ (Home)

\_\_\_\_\_ (Work)

\_\_\_\_\_ (Cell)

\_\_\_\_\_ (\_\_\_\_\_)

Email Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

It is very important that we receive this information for your benefit. This is general information needed by your homeowners association and will be filed in your personal file in the **HOA Manager's Office** at Russell Property Management.

**PLEASE MAIL 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**

I, \_\_\_\_\_, hereby authorize Russell  
Property Management to draft my HOA dues for the street address

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Home Address	City	State	Zip
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(Mailing Address for unit (If different than address above)	City	State	Zip
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Draft Payable to (HOA name)

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Day of Month for Draft	Amount to be Drafted
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Draft Frequency (circle one)  Monthly  Quarterly  Annual

Contact Phone Number \_\_\_\_\_

Please note:

- \* If HOA dues are increased, your draft will automatically be increased
- \*\* HOA dues will be drafted approximately 5 days before your associations late day.
- \*\*\* The HOA will draft the account balance.
- \*\*\*\* Bank Drafts will NOT draft for special assessments (if applicable).
- \*\*\*\*\* There is a \$1 fee per draft for this service.

Bank Name: \_\_\_\_\_

Account Holder Name: \_\_\_\_\_

Routing #: \_\_\_\_\_

Account #: \_\_\_\_\_

Account Type:  Checking  Savings

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Signature \_\_\_\_\_ Date \_\_\_\_\_

**ATTACH VOIDED COPY OF CHECK  
HERE**

**Russell Property Management, Inc.**

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Phone: 252.329.7368 Fax: 252.355.9641

**Credit/Debit Card Draft Authorization**

I, \_\_\_\_\_, hereby authorize Russell

Property Management to draft my HOA dues for the street address

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Home Address	City	State	Zip
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Draft Payable to (HOA name)

---

Day of Month for Draft	Amount to be Drafted
------------------------	----------------------

---

Draft Frequency (circle one)  Monthly  Quarterly  Annual

Contact Phone Number \_\_\_\_\_

Please note:

- \* If HOA dues are increased, your draft will automatically be increased
- \*\* HOA dues will be drafted approximately 5 days before your associations late day.
- \*\*\* The HOA will draft the account balance.
- \*\*\*\* Drafts will NOT draft for special assessments (if applicable).
- \*\*\*\*\* There is a 3.0% fee per draft for this service.

**Account Holder Name:** \_\_\_\_\_

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Card Billing Address	City	State	Zip
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**Account #:** \_\_\_\_\_

Expiration Date: \_\_\_\_\_ Security Code: \_\_\_\_\_

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Signature	Date
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