Fieldstone at Landover Homeowner's Association, Inc.

Breakdown of Dues Paid

The Board of Directors has provided the below a summary of what benefits Fieldstone homeowners receive from paying HOA dues assessments. The Fieldstone Board of Directors encourages you to read the Covenants and Bylaws thoroughly. If you have any questions about the legal documents consult your attorney, the property management company, or Board members. It is the responsibility of the Fieldstone Board of Directors to establish a budget to cover the expenses of the Association and prioritize/approve how funds are spent on the behalf of the HOA and its members.

Dues Assessment: \$42.00 per month (eft 7.1.23)

Due Date: 1st day of the month

Late: 11th day of the month

Late Fee: greater amount - \$10 or .6667% of total balance

Dues Pay For:

Association management Entrance sign maintenance

General Liability / Directors & Officers insurance coverage

Lawn maintenance (outside of fenced in areas only)

HOA Manager: Brittney Bruin

brittney@russellpm.com

252-329-7368

Fieldstone at Landover Homeowners Association, Inc.

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 Nam	ne:
Owner's Mailing Address:	
-	
Telephone:	(Home)
	(Work)
	(Cell)
Email Address:	

It is very important that we receive this information from you for your benefit. This is general information needed by your homeowner's association and will be filed in your personal file in the **HOA Office** at Russell Property Management and your email will be used to invite you to the FrontSteps portal. You can email this form back to your manager rather than returning it via postal mail.

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

Fieldstone HOA

106 Regency Blvd. Greenville, NC 27834

Phone: 252.329.7368 Fax: 252.355.9641 www.russellpm.com

Homeowners Association TENANT Information Sheet

Owner's Name and Mailing address:							
Property Address:							
Check the box to indicate if the property		is used as an investment					
	or		resided in by a family member				
Property Manager:							
Tenant's Name:							
Tenant's Contact Information:							
(Home)			(Work)				
(Cell)			(Email)				
Tenant's Name:							
Tenant's Contact Information:							
(Home)			(Work)				
(Cell)			(Email)				
Lease Term Dates:							

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. We suggest that any owner who rents their unit within Fieldstone attached the "Crime Free Lease Addendum" to the lease agreement with their tenant/s.

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

Draft Authorization

I,	, hereby authorize Russell Property					
Management to charge my monthly dues/rent to the following account:						
(A.11 6 i)						
(Address for unit)	(Mailing address, if different from Unit)					
Draft Payable to (HOA	name)					
Date of First Draft						
Amount to be drafted e	each month					
** HOA dues will be	ncreased, your draft will automatically be increased drafted approximately 5 Days before the associations late day. per draft for this service.					
Signature	Date					
Bank Name:						
Routing #:						
Account #:						
PLEASE AT	TACH OR EMAIL IN A PICTURE OF A VOIDED CHECK					

Russell Property Management, Inc. 106 Regency Blvd Greenville, NC 27834

Phone: 252.329.7368 Fax: 252.355.9641

Credit/Debit Card Draft Authorization

I,	, hereby authorize Russell Property						
Management to draft my HOA dues	s for the fol	lowing account:					
Home Address		City	State	Zip			
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 of the HOA dues will be drafted approximate day. *** The HOA will draft the account the will NOT draft for specific the specific s	ximately 5 of the transfer that assessment of this ser	days before your ass nents (if applicable). vice.	sociations				
Account Holder Name:							
Card Billing Address		City	State	Zip			
Credit/Debit Card #:							
Expiration Date: S	Security Co	de:					
Signature			te				