Holly Grove

106 Regency Blvd. Greenville, NC 27834

Phone: 252.329.7368 Fax: 252.355.9641 www.russellpm.com

HOA Information Sheet

A. Dues: \$375 per year eff 1.1.25

Dues Cover: Common Area Maintenance

Common Area Landscaping

Signage Lighting Management Fees

General Liability Insurance

HOA manager is Tonya Rosado All concerns and maintenance requests should be emailed to tonyar@russellpm.com or you may call 252.329.7368.

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Homeowners Association Information Sheet

Property Address:		
Homeowners Name:		
Spouse or Co-Owner's Name: _		
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!

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 Man					
draft my HOA dues for the stre	et address					
Home Address	City	State	Zip			
(Mailing Address for unit (If di	fferent than address above)	City State	Zip			
	Draft Payable to (HOA name	e)				
Day of Month for Draft		Amount to be D	Prafted			
Draft Frequency (circle one)	MonthlyQuart	erlyAnn	ual			
Contact Phone Number						
** HOA dues will be dr *** The HOA will draft	T draft for special assessmen	efore your assoc	iations late da			
Bank Name:						
Account Holder Name:						
Routing #:						
Account #: Account Type:	Checking	Savings				
		· · · · · · · · · · · · · · · · · · ·				
Sign	nature		Date			

ATTACH VOIDED COPY OF CHECK HERE

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 N				
draft my HOA dues for the street address	S				
Home Address	City	State	Zip		
Draft Pag	yable to (HOA name)				
Day of Month for Draft		Amount to be Drafted			
Draft Frequency (circle one)Mon	nthlyQuarter	An	nual Contact I	Phone Number _	
* If HOA dues are increased, you ** HOA dues will be drafted app *** The HOA will draft the account *** Drafts will NOT draft for species **** There is a 3.0% fee per draft for *** Account Hold*	proximately 5 days be ant balance. cial assessments (if ap	fore your assoc		ıy.	
Card Billing Address	City	State	Zip		
Account #: _					
Expiration Date:	Security Code:				
Signature		Date			