

Kinsey Creek Owner's Association, Inc.

106 Regency Blvd.

Greenville, NC 27834

Phone: 252.329.7368 Fax: 252.355.9641

- A. Dues: \$60.00 per month
Draft: 5th Day of the Month
Late: 11th Day of the Month
Late Fee: \$10
Dues Include: General Liability Insurance
Pest Control
Termite Inspections
Parking Lot/ Street Lighting
Landscaping
Exterior Building Maintenance (except glass surfaces and doors)
Paving/ Sidewalks
- B. Pest Control: Eastline 252-633-1719
- C. Landscaping: US Lawns
- D. Termite Control: 1 annual inspection
Eastline 252-633-1719
- E. Maintenance: Exterior Building Maintenance. NO interior work.
No Doors, Windows or Skylights

HOA Manager: Tonya Rosado

All concerns and maintenance requests should be emailed to
tonyar@russellpm.com or call 252.329.7368

Kinsey Creek HOA
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: _____

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

Draft Authorization

I, _____, hereby authorize Russell Property

Management to charge my monthly dues/rent to the following account:

(Address for unit)

(Mailing address, if different from Unit)

Draft Payable to (HOA name)

Date of First Draft

Amount to be drafted each month

Please note:

* If HOA dues are increased, your draft will automatically be increased

** HOA dues will be drafted approximately 5 Days before the associations late day.

*** There is a \$1 fee per draft for this service.

Signature

Date

Bank Name: _____

Routing #: _____

Account #: _____

PLEASE ATTACH OR EMAIL IN A PICTURE OF A VOIDED CHECK