

Tyson Farms Homeowners Association, Inc.

106 Regency Blvd.

Greenville, NC 27834

Phone: 252.329.7368 Fax: 252.355.9641

www.russellpm.com

HOA Information Sheet

A. Dues: \$37 monthly

Dues Due: 1st day of the month

Late if not received by the last day of the month

Late Fee: 8% per annum

Dues Cover: General Liability Insurance
Directors & Officers Insurance
Common Area Maintenance
Common Area Landscaping
Pool Maintenance
Management Fees

B. Additional Information

- a. Insurance: Nationwide – Stephen West (252)756-3212
Liability on common ground only
- b. Termite Inspection: First year of new builds – care offered through Bill Clark Homes
- c. Trash Pick-up: Tuesday; Bulk pick-up (anything outside the can) must be called into the city (252) 329-4522
- d. Landscaping: Pirate Lawn Enforcement – ALL landscape concerns must be in writing

HOA manager is Amber Whittington.

All concerns and maintenance requests should be emailed to amber@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 homeowners association and will be filed in your personal file in the **HOA Office** at Russell Property Management.

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

Russell Property Management, Inc.

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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

| | | | |
|--------------|------|-------|-----|
| Home Address | City | State | Zip |
|--------------|------|-------|-----|

| | | | |
|---|------|-------|-----|
| (Mailing Address for unit (If different than address above) | 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 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

| | |
|-----------|------|
| Signature | 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 Management to draft my HOA dues for the street address

| | | | |
|--------------|------|-------|-----|
| 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 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: _____

| | | | |
|----------------------|------|-------|-----|
| Card Billing Address | City | State | Zip |
|----------------------|------|-------|-----|

Account #: _____

Expiration Date: _____ Security Code: _____

| | |
|-----------|------|
| Signature | Date |
|-----------|------|