

# Teakwood Green Homeowners Association, Inc.

## Breakdown of Dues Paid

The information provided below is not meant to cover all aspects of the *Teakwood Green Homeowners Association, Inc.* Covenants but the Board has provided below a summary of what benefits *Teakwood Green Homeowners Association, Inc.* homeowners receive from paying HOA dues. *Teakwood Green Homeowners Association, Inc.* Board of Directors encourages you to read the covenants thoroughly and become active in the association by participating in annual meetings and serving on boards. If you have any further questions about the covenants, consult your attorney, the property Management Company or WP Board members. It is the responsibility of the *Teakwood Green Homeowners Association, Inc.* Board of Directors to establish a budget to cover the expenses of the association and prioritize/approve how dues spent on the behalf of the HOA and its members.

### HOA Information Sheet

- A. Dues: \$125.00 per year  
Due Date: January 1<sup>st</sup>  
Late: 31st day of January  
Late Fee: 1% of unpaid charges

Dues Cover:           General Liability Insurance  
                             Directors and Officers  
                             Landscaping of Entrance Signage  
                             Detention Area Maintenance  
                             Professional Property Management

HOA Manager: Freedom Edmundson  
All concerns should be emailed to [freedom@russellpm.com](mailto:freedom@russellpm.com) or call  
252.329.7368.

**Russell Property Management**  
106 Regency Blvd  
Greenville, NC 27834

Phone: 252.329-7368/ Fax: 252.355.9641  
www.russellpm.com

## Teakwood Green Homeowners Association, Inc.

### 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!**

# Draft Authorization

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

Management to draft my HOA dues for the street address

\_\_\_\_\_

\_\_\_\_\_  
(Home Address)

\_\_\_\_\_  
Draft Payable to (HOA name)

\_\_\_\_\_  
Date of Month for Draft

\_\_\_\_\_  
Amount to be Drafted

Date 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 the 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

# Credit/Debit Card Draft Authorization

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

Management to draft my HOA dues for the street address

\_\_\_\_\_

\_\_\_\_\_  
(Home Address)

\_\_\_\_\_  
Draft Payable to (HOA name)

\_\_\_\_\_  
Date of Month for Draft

\_\_\_\_\_  
Amount to be Drafted

Date 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 the 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.

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

\_\_\_\_\_  
Card Billing Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip

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

Expiration Date: \_\_\_\_\_

Security Code: \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date