

***Williamsbrook Subdivision Homeowner's Association, Inc.***

106 Regency Blvd.

Greenville, NC 27834

Phone: 252.329.7368 Fax: 252.355.9641

[www.russellpm.com](http://www.russellpm.com)

**HOA Information Sheet**

- A.   **Dues:**           \$30.00 per month  
      **Draft Date:** The 5<sup>th</sup> Day of the Month  
      **Late Date:**   The 11<sup>th</sup> Day of the Month  
      **Late Fee:**    \$10.00

**Dues Cover:** General Liability Insurance for Common Area  
                  Directors Insurance  
                  Landscaping outside fenced-in areas

All concerns should be emailed to [freedom@russellpm.com](mailto:freedom@russellpm.com) or  
contact Freedom Edmundson at 252-329-7368.

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Homeowner Information Sheet

Property Address: \_\_\_\_\_

Homeowner's Name: \_\_\_\_\_

Spouse or Co-Owner's Name: \_\_\_\_\_

Owner's Mailing Address:

\_\_\_\_\_  
\_\_\_\_\_

Telephone: \_\_\_\_\_ (Home)

\_\_\_\_\_ (Work)

\_\_\_\_\_ (Cell)

\_\_\_\_\_ (\_\_\_\_\_)

Email Address: \_\_\_\_\_

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 Manager's Office at Russell Property Management.

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

# Russell Property Management

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## Homeowners Association TENANT Information Sheet

Homeowners Association: \_\_\_\_\_

Owner's Name and Mailing address: \_\_\_\_\_

\_\_\_\_\_

Property Address: \_\_\_\_\_

Tenant's Name: \_\_\_\_\_

Tenant's Contact Information:

\_\_\_\_\_ (Home) \_\_\_\_\_ (Work)

\_\_\_\_\_ (Cell) \_\_\_\_\_ (Email)

Tenant Vehicle Information:

Make and model \_\_\_\_\_

License Plate \_\_\_\_\_

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.

PLEASE MAIL OR EMAIL OR FAX TO US ASAP!  
THANK YOU FOR YOUR TIME.

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# 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 |
|------------------------|----------------------|
| 1                      |                      |
| 2                      |                      |
| 3                      |                      |
| 4                      |                      |
| 5                      |                      |
| 6                      |                      |
| 7                      |                      |
| 8                      |                      |
| 9                      |                      |
| 10                     |                      |
| 11                     |                      |
| 12                     |                      |
| 13                     |                      |
| 14                     |                      |
| 15                     |                      |
| 16                     |                      |
| 17                     |                      |
| 18                     |                      |
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| 20                     |                      |
| 21                     |                      |
| 22                     |                      |
| 23                     |                      |
| 24                     |                      |
| 25                     |                      |
| 26                     |                      |
| 27                     |                      |
| 28                     |                      |
| 29                     |                      |
| 30                     |                      |
| 31                     |                      |

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 \_\_\_\_\_

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 Signature

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 Date

ATTACH VOIDED COPY OF CHECK HERE

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**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

