# Westpointe Townhomes Homeowner's Association, Inc. Breakdown of Dues Paid

The information provided below is not meant to cover all aspects of the *Westpointe* Covenants but the Board has provided below a summary of what benefits *Westpointe* homeowners receive from paying HOA dues. *Westpointe* 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 *Westpointe* 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.

A. Dues: \$80.86 per month eff 2.1.25

Due Date: 1st Day of the month
Draft Date: 15th Day of the month
Late: 20th day of month

Dues Include:

Directors and Officers Insurance

Dumpster Maintenance

Exterior Building Maintenance General Liability Insurance Landscaping (outside of patios)

Management Fees

Parking Lot/ Street Lighting

Paving/ Sidewalks

Pest Control

**Termite Inspections** 

B. Pest Control: Eastline Pest control 252-633-1719

C. Landscaping: Littles Nursery

D. Termite Control: 1 annual inspection and on-call basis

Eastline Pest control- 252-633-1719

E. Maintenance: Exterior Building Maintenance. No interior work.

No Doors, Windows, or Skylights

HOA Manager: Amanda Blomefield All concerns should be emailed to amanda@russellpm.com or call 252.329.7368.

#### Russell Property Management, LLC

106 Regency Blvd Greenville, NC 27834 Phone: 252.329.7368 Fax: 252.355.9641

www.russellpm.com

### Westpointe HOA

#### Homeowner 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)			
Dı	raft Payable to (He	OA 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 ** HOA dues will be drafted approximal late day.  *** The HOA will draft the account bal **** Bank Drafts will NOT draft for sp  **** There is a \$1 fee per draft for this	ance.  ecial assessments	re the associations	
Bank Name:			
Account Holder Name:			
Routing #:			
Account #:			
Account Type: Checking	Savings		
Signatura		Doto	

# ATTACH VOIDED COPY OF CHECK HERE

## **Credit/Debit Card Draft Authorization**

I,	_, hereby author	_, hereby authorize Russell Property				
Management to draft my HOA dues for the street address						
(Home Address)						
(Home Address)						
Dra	aft Payable to (H	(OA 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 ** HOA dues will be drafted approximatelate day.  *** The HOA will draft the account bala **** Bank Drafts will NOT draft for specific at \$1 fee per draft for this	tely 5 Days beformance.  ecial assessments	re the associati	ions			
Account Holder Name:						
Card Billing Address	City	State 2	Zip			
Account #:						
Expiration Date:	Secu	arity Code:				
Signature	_	Date				

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Phone: 252.329.7368 Fax: 252.355.9641

#### **Tenant Information Sheet**

If you rent your unit, please complete the following information about your tenant(s). This form MUST be returned to the address above or email it to us.

Today's Date:	Subdivision:		
Property Address:			
Homeowner's Name & Mailin	ng Address:		
	Phone #'s:		_
IS YOUR UNIT AN:			
INVESTMENT PRO	OPERTY		
FAMILY MEMBER	R RESIDE IN THIS UNIT		
Tenant Name(s): 1 2.		Phone:Phone:	
3.			
Tenant Vehicle Information:			
Vehicle #1	Make:	Model: Color:	
Τ	Tag #:	Color:	
Vehicle #2 Make Tag #	Make:	Model:	
	Make: Tag #:	Color:	<u> </u>
Do tenants or family members	have a Pet? Yes No	(Please circle answer)	
Please make sure to give all to abide by said documents,		ation by-laws and rules/regulation by-laws and rules/regulation.	ations. Should the tenant fail
Signature of Homeowners		Date	
Signature of Homeowners		Date	