

***Harris Landing Homeowners 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: \$90/annually

Initial Capital Contribution: \$550 at closing of each sale of the dwelling.

Dues Due: First Day of Calendar Year

Dues Cover: Landscaping around CBU

Landscaping of Common Area (behind homes along  
Blount Hall Road and Sam McLawhorn Road)

General Liability Insurance and Directors & Officers

Maintenance of CBU (as needed)

Streetlights

Professional Property Management

Your Community Manager is Brittney Bruin

All concerns and maintenance requests should be emailed to  
[brittney@russellpm.com](mailto:brittney@russellpm.com) or you may call 252.329.7368.

***Harris Landing Homeowners Association, Inc***

106 Regency Blvd.

Greenville, NC 27834

Phone: 252.329.7368 Fax: 252.355.9641

www.russellpm.com

**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 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**