

ELECTRONIC
DISCLOSURE PACKAGE REQUEST FORM
14 CALENDAR DAYS PROCESSING TIME
****NO RUSH ORDERS WILL BE TAKEN****

DUE DATE: _____

****Office Use Only****

Date Received: _____

Account # _____

Lot# _____

Requested By: _____ of _____

Phone: _____ Email: _____

Village _____ Address: _____

Seller: _____ Closing Date: _____

Who do you wish to email the disclosure package to? PLEASE PRINT

Seller Email Contact

Buyer Email Contact

1) _____ 2) _____ 3) _____

4) _____ 5) _____

I have been made aware of and agree to the following:

-The electronic disclosure package and inspection is \$317.95.

-There are no rush orders at this time

-The completed disclosure will be available for pickup by 4pm on the 14th day from the date of submission of this request

-I understand that a member(s) of the KCOA staff will enter onto my lot and do a front and backyard inspection within the next 14 days for the purpose of my resale disclosure packet required by state law. I agree to indemnify and hold harmless the staff and KCOA from any and all claims.

TOTAL AMOUNT OWED BY SELLER \$317.95

*I do _____ or do not _____ have a dog that stays in my rear fenced yard.

Signature of Owner _____ Date: _____

Print Name _____

****If the homeowner chooses, the KCOA staff will review the property prior to closing and issue a notification stating all items have been completed for an additional inspection fee of \$141.31. The Association will need at least 72 hours to re-inspect and update the disclosure certificate. This amount may be paid for at the time of closing.**

Signature of Owner _____ Date: _____

Signature is required as acknowledgment; you are NOT ordering a re-inspection at this time.

****ALL HIGHLIGHTED AREAS MUST BE SIGNED IN ORDER TO PROCESS YOUR REQUEST****

****ALL SIGNATURES MUST BE SIGNED BY THE OWNER OF THE PROPERTY****

****Please make sure to order another disclosure from your property management company if you live in: Cascades, Eagle Sound, Fairways, Gleneagles, Images, Masters, Pinehurst, Sanctuary, Shoreline, Westgate, Willow Point, or Windbrook.****

Office Use Only

Pick Up Date: **At 4:00 p.m. on** _____ M T W R F

Order Taken By: _____ Date: _____ ☐ Pay at closing

Payment Received: Amount \$ _____ Re-inspection Fee \$ _____ Check # _____

VCKOA (Reserve Balance) _____ as of: _____

Sub-Assoc. (Reserve Balance) _____ as of: _____

Past Due Assessments: _____ Current: Yes No Paid Thru: _____

Current Loan: _____

TOPS files checked: ☐ No Pre-existing Violations ☐ See attached page for pre-existing violations from TOPS

VIOLATIONS: ☐ None ☐ Violation None ☐ More Violations On Back

- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____

Inspection Done By: _____ Date: _____

Re-Inspection: Inspection Done By: _____ Date: _____

PREPARED BY: _____ Date: _____