

REQUEST FORM

Re: Refinance/Sale of Unit

Dear Unit Owner,

We have received your inquiry for information pertaining to the sale of your unit. Prior to releasing any information we must have your authorization to do so. Find enclosed an authorization form to be completed in its entirety and returned to this office prior to the sale of your unit.

Please read the enclosed information which explains the transfer fee that Empire charges for services related to sales and refinances.

Upon receipt of your signed Authorization form and transfer fee (*see schedule below), we will release the requested information to your authorized contact and prepare the 6(d) certificate and/or questionnaire. Please make sure you write the closing date on the Authorization Form. If you do not have a closing date yet, it is up to you to call this office and inform us of the closing date in order to receive the necessary documents in time for the closing.

Payment must be in the form of a Bank Check or Money order and made payable to Empire Condominium Professionals. NO PERSONAL CHECKS WILL BE ACCEPTED.

- 6(d) Certificate and Bank Questionnaire Form: \$125.00
- 6(d) Certificate (only): \$ 50.00
- *Bank Questionnaire (only): \$ 75.00
- Condos Docs (only): \$ 25.00

*Empire issues a standard form for all questionnaire requests. Due to liability purposes **Empire will not fill out an outside party questionnaire.** If an outside party questionnaire is required, it can be forwarded to the association attorney for completion for an additional fee. Please note this fee must be paid prior to Empire's sending the outside party questionnaire to the association's attorney and must be in the form of money order or cashier's check, made payable to the association. Please note outside party questionnaire completion can take up to 10 business days.

** There is a \$50.00 administration fee that must be paid in addition to all above listed fees. Should the above listed documents be required in less than 10 business days, there is a rush fee of \$50.00.

THE FINAL PAYMENT OF YOUR CONDO FEE MUST BE IN THE FORM OF A MONEY ORDER OR CERTIFIED CHECK. PLEASE MAIL PAYMENTS DIRECTLY TO:

Empire Condominium Professionals
33 Lyman Street Suite 210
Westborough, MA 01581

Prior to filling out this form, we strongly recommend that you speak with your closing attorney, realtor, and/or account representative if you have any questions about what information to obtain. Please ensure that one contact person is appointed and that all other individuals involved with the sale or refinance of your home are aware of whom the appointed contact person is. If you have questions or concerns, please contact our office at 508-898-3431.

Sincerely,

Empire Condominium Professionals

Authorization Form

Proposed Closing Date: _____

*A Certificate of Insurance may be obtained by calling the Property's Insurance Agent directly

Please complete the following information:

Unit Owner Name(s) _____

Unit Address: _____

Forwarding Address: _____

New Unit Owners Name(s) _____

Daytime Phone _____ Sale or Refinance*: _____ Selling Price of Unit: \$ _____

Authorized Contact Information: This person will receive all information relating to the Condominium/Association. Information will not be released to any other party. (Please select only one contact – e.g. Closing Attorney, Realtor or Representative of Financial Institution)

Name & Title: _____

Company/Firm: _____

Mailing Address: _____

Phone: _____ Email: _____

Requested Information/Documentation: (Please check all documents required)

Condos Docs: _____ Bank Questionnaire: _____ Current Budget: _____ 6(d) Certificate: _____
(Certificate of no unpaid common expenses)

By signing below, I/We, _____ agree to pay the required fee per attached schedule and hereby authorize Empire Condominium Professionals to release information/documentation in regards to the sale/refinance of my condominium to the above mentioned individual who we have designated as our contact. I understand that no information will be released until said fees and authorization form are received by Empire Condominium Professionals.

Owner Signature: _____ Date: _____

Owner Signature: _____ Date: _____

*****Return completed form and administration fee of \$50.00 plus costs of all documents requested (No Personal Checks will be accepted)**

All requests are processed in the order in which they are received and can take 7-10 business days to complete. Should you need the requested document(s) prior to the standard 7-10 business days there is an additional rush fee of \$50.00.

PLEASE READ THE COVER LETTER FOR FURTHER INFORMATION

Payable to: Empire Condominium Professionals
Mail to: Empire Condominium Professionals 33 Lyman Street, Suite 210, Westborough, MA 01581