



Dear Unit Owner(s);

We have received your inquiry for information pertaining to the refinance/sale of your unit. Prior to releasing any information, we must have your authorization to do so. Attached please find an authorization form to be **completed in its entirety** and returned to our office along with all applicable payments, prior to the release of all requested documents. **Incomplete Authorization Forms WILL NOT BE PROCESSED.** 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 our 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 Cashier's Check or Money Order and made payable to Empire Condominium Professionals. **NO PERSONAL CHECKS WILL BE ACCEPTED. If dropping off, exact cash may be used.**

- 6(d) Certificate and Standard Questionnaire Form: \$175.00
- **6(d) Certificate (only): \$ 75.00
- *Standard Questionnaire (only): \$ 100.00
- Condo Documents, Financial Documents, or Current Budget: \$ 25.00/each

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.

All requests are processed in the order in which they are received and can take 7-10 business days to complete. Please do not reach out for updates prior to the 7-business day mark.

*Empire issues a standard form for all questionnaire requests. **If an outside party questionnaire is required there is an increased fee for the completion of the outside party document (\$250).** In addition, all outside party questionnaires can take up to 10 business days to complete, there is not a rush option available.

All 6D certificates must be mailed or picked up at our office, as the original will be required for your closing. **Should you wish to have the document sent via FedEx or Express mail, a prepaid envelope or label must be provided and there is an additional convenience charge of \$20. Please make every effort to avoid this method when possible.

THE FINAL PAYMENT OF YOUR CONDO FEE MUST BE IN THE FORM OF A MONEY ORDER OR CERTIFIED CHECK, CASH WILL NOT BE ACCEPTED. PLEASE MAIL OR DROP OFF PAYMENTS DIRECTLY TO OUR ADDRESS LISTED ABOVE.

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 request. 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. **Duplicate requests will not be refunded.**

Please contact the association insurance agent for a copy of the master certificate of insurance.

If you have questions or concerns, please contact our office.

Thank you!

PLEASE READ THE COVER LETTER BEFORE COMPLETING BELOW INFORMATION

Authorization Form

Incomplete Authorization Forms WILL NOT BE PROCESSED. Highlighted fields must be complete.

Proposed Closing Date: _____

Current Unit Owner Name(s): _____

Unit Address: _____

Current Owner(s) Forwarding Address (sale only): _____

New Unit Owners Name(s) (sale only): _____

New Owner(s) Mailing Address (sale only; used after closing to send welcome information): _____

New Owner(s) Phone (sale only): _____ New Owner(s) Email (sale only): _____

Selling Price (For Right of First Refusal Only): _____

IF YOU HAVE AUTOMATIC PAYMENTS SET UP THROUGH OUR OFFICE PLEASE CHECK THIS BOX

If you have an automatic payment setup via PayLease (association website) or your bank, please cancel it directly.

Authorized Contact Information: This person will receive all requested information. Information will not be released to any other party. **(Please select only one contact person).**

If you would like to pick up the 6D Certificate or Right of First Refusal please check here (if left unchecked documents will be mailed):

Contact Name & Title: _____

Contact Company/Firm: _____

Contact Mailing Address: _____

Contact Phone: _____ **Contact Email:** _____

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

Condos Docs: _____ Standard Questionnaire: _____ Current Budget: _____ 6(d) Certificate: _____
(Certificate of no unpaid common expenses)
Financial Documents: _____ Rush: _____ Outside Party Questionnaire: _____ Right of First Refusal: _____
(If applicable)

By signing below, I hereby authorize Empire Condominium Professionals to release information/documentation in regards to the sale/refinance of my property to the above mentioned individual who I have designated as my contact. I understand that no information will be released until said fees and authorization form are received by Empire Condominium Professionals. Payment for the requested documents can be submitted by the buyer and/or seller and must be included with a completed copy of this form.

Current Owner Signature: _____ **Date:** _____

FOR ADMIN USE ONLY

Received: _____ **Payment:** _____ **Method:** _____