



FIRST COLONY
COMMUNITY ASSOCIATION

REQUEST FOR RESIDENTIAL PROPERTY FEES

REQUESTING ENTITY: _____	DATE: _____
CONTACT: _____	SERVICE REQUESTED: PLEASE CIRCLE ONE
PHONE: _____	MAINTENANCE/TRANSFER FEE QUOTE
FAX: _____	MAINTENANCE/REFINANCE FEE QUOTE

PROPERTY INFORMATION

SUBDIVISION: _____	ADDRESS: _____
SECTION: _____	_____
LOT: _____ BLOCK: _____	FCCSA ACCOUNT #: _____

OWNER INFORMATION

BUYER: _____

BUYER MAILING ADDRESS: _____

CURRENT OWNER: _____

SPECIAL INSTRUCTIONS: _____

FCCA ANNUAL ASSESSMENT

FCCSA (CLASS A) RATE: AMOUNT \$ _____ NHBD AMT \$ _____ DATE PAID _____	DEVELOPER (CLASS B) RATE: AMOUNT \$ _____ NBHD AMT \$ _____ DATE PAID _____
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FEES AND CHARGES DUE

YEAR	ASSESSMENT AMT	NEIGHBRHD FEE	LATE CHG	INTEREST	DR FINES	LEGAL FEES	REFINANCE	TRANSFER / COC	OTHER

TOTAL AMOUNT DUE:

TITLE COMPANY DETAILS

TITLE COMPANY: _____	GF NUMBER: _____
ATTENTION: _____	PHONE/FAX NUMBER: _____

SELLER MUST REQUEST A CERTIFICATE OF COMPLIANCE FROM FCCA PRIOR TO CLOSING
CONTACT THE COMPLIANCE DEPARTMENT

FCCA QUOTE FEES (EFFECTIVE SEPTEMBER 1, 2001)
1ST REQUEST **NO CHARGE** / 2ND REQUEST \$25 / RUSH \$50 (GF NUMBER IS REQUIRED)
PLEASE FORWARD TOP PORTION OF CLOSING STATEMENT TO FCCA