716 West Meeker St., Suite 101, Kent, WA 98032 Office: 253-852-3000 Fax: 253-852-1417 Website: www.aroundtheclockinc.com Email: info@aroundtheclockinc.com

REQUEST FOR ASSOCIATION DOCUMENT REVIEW SALES FORM

I request that Around the Clock, Inc. CRMC, managing agent for the Homeowners Association named below, provide the financial statements and meeting minutes required by law to sell my property. I acknowledge that the Association, or its agent, is permitted four (4) business days from receipt of written request AND the full payment. Please note if payment is being made electronically you will need to submit a copy of your receipt showing the payment was made with this completed request form. If the request and payment are received after 3pm it will be considered the next business day. Request and payment confirmation are to be sent to info@aroundtheclockinc.com for processing.

I understand that the **full payment and/or payment receipt** is due before statements will be provided, a copy of the signed addendum must be provided with the request, and checks need to be made payable to Around the Clock, Inc., CRMC. I also understand that the financial statements will only be released pursuant to the instructions detailed below.

<u>Description of Unit</u> (PLEASE TYPE	E OR PRINT)
Homeowners Association	
Owner Name:	
Street Address:	
City, State:	Unit#:
This request is made by:	
	(W)(H)
Printed Name	Telephone Numbers
Signature	Date:
Payment Options:	
Documents. I further understand days of receipt of the full payment Clock, Inc. CRMC°. If the request is ONE of the following:	
☐ I request the information to be	e provided via email.
Documents at a fee of \$160.00. Th	s matter, I require an expedited preparation of the Financial Statements & ne Financial Statements & Documents will be completed within 2 business days of his written request form at Around the Clock, Inc. CRMC°. If the request is

Deliver	y Options (check one):						
	I will pick up the Financial Statements and Documents. Please contact at () at ()						
	Please Fax the Financial Statements and Documents to the following number: Attention:						
	Fax:						
	Please mail the Financial Statements and Documents to the following address:						
	Please E-mail the Financial Statements and Documents to:						
· · · · · · · · · · · · · · · · · · ·		Around the Clock, I		253-852-3000 Phone			
		716 West Meeker S Kent, WA 98032	st., Suite 101	253-852-1417 Fax www.aroundtheclockinc.com			
		Kent, W/X 30032		www.aroundinecroekine.com			
For Offi	ce Use Only:	eived Pavment Receive	ed				
Received by:			(circle one) E-mail/Fax/Mail/Other				
Date/Time Packet Received:							
Prepped by: Date/Time Completed:							
Completed by:		Date/Time Completed	:				
CICNIAT	UDE OF DEDCOM ACCEPTION	NC COMPLETED CERTIFIC	A.T.				
	URE OF PERSON ACCEPTING			Data			
receive	a by (signature upon rece	ipt)		Date:			
SIGNAT	URE OF AROUND THE CLO	OCK. INC. CRMC® FMPI OV	FF RELEASING COMPLETER	RESALE CERTIFICATE:			
	SIGNATURE OF AROUND THE CLOCK, INC. CRMC® EMPLOYEE RELEASING COMPLETED RESALE CERTIFICATE: Released / Mailed / Faxed (circle one) by: Date:						
	return this sheet to the Co						
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