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Management Proposal Data

Association Information:

Legal Name: _____

Property Address: _____

County: _____ State: _____ Zip code: _____

of Board Members: _____

Monthly Dues \$ _____ Annual Dues \$ _____ Budget \$ _____

Contract Information:

Term: 1 yr _____ 2 yr _____ 3 yr _____

Start Date: _____

of Buildings: _____ # of Units: _____

Twin Homes: _____ Townhomes: _____ Condo: _____ Single Family: _____

of Meetings: Quarterly _____ Bi-Monthly _____ Monthly _____

of Financials: Quarterly _____ Monthly _____

Monthly Fee \$ _____ Per Unit Cost \$ _____ Annual Income \$ _____

Contact Information:

Contact Person: _____ Board Position Held: _____

Mailing Address _____

Email: _____

Phone: _____

Notes:

Amenities: _____, _____, _____

_____, _____, _____

Rentals Permitted: Yes _____, No _____