

**Hillcrest Bay Homeowners' Association
924 Bay View Drive
Parker, AZ 85344-8108**

—REQUEST TO INSPECT ASSOCIATION RECORDS—

Date:

Name:	
Email:	
Address:	
Phone:	

Documents I wish to inspect: (Please be specific)

My purpose for wishing to inspect the records: (Please be specific)

____ (Initials) I certify I will use the information for the described purpose
____ (Initials) I affirm my understanding that the information provided is copyright protected by the HOA and is for my sole use and shall not be copied or provided to any other party.
____ (Initials) I understand that contracts will be viewable for inspection at the Association's place of Business only, no copies will be provided.

CONSENT

I hereby acknowledge that the Association will charge me \$.15 per page for copies of any and all documents to which I request copies. If I wish documents to be mailed to me, I acknowledge that the Association will charge applicable mailing costs to my account.

Signature: _____ *Date:* _____

Documents will be made available within 10 business days of receipt of request.