## **REQUEST FOR RESALE PACKET**

Date of Request:	
Lot Owner:	
Lot Address:	
Cell, Work or Home Phone:	
Email Address:	
Projected Closing Date:	
Delivery Address (If different):	
Buyer Name:	
•	In order to facilitate the sale of my Unit and pursuant to the provisions of The Title 68 (Real & Personal Property) of the Pennsylvania Consolidated Statutes, Section 5407, I hereby request that you furnish the Resale Packet for the Unit identified above.
•	I understand that the Resale Packet must be provided to me within ten (10) days of the actual receipt of this request and that payment in full for the preparation of the Resale Packet must accompany this request.
•	Enclosed is a check in the amount of \$395.00 payable to Neighborhood Management Group for preparation of the Resale Packet. It is also understood, if the resale certificate requires updated (same Buyer only and reissued within 30 days of the original request), a \$125.00 fee will apply and additional charges will apply for the following: expedited requests (notice of less than three business days) or overnight delivery service (FedEx, Airborne of DHL). Email or USPS Priority Mail service is included in the base price.
•	I hereby certify that any improvements or alterations made to the Unit are not in violation of the Declaration, the Bylaws and any architectural guidelines adopted by the Association.
Therek	by designateto receive this certificate
for resale on my behalf at the following address:	
Real Estate Company:	
Address:	
Phone:	
	Address:
Owne	r Signature
PAYMENT MUST ACCOMPANY THIS REQUEST	
РО ВОХ	orhood Management Group
	FFICE USE ONLY: equest Rec'd:Amount Paid: