



ACCOUNT WAIVER REQUEST FORM

Association Name: _____

Legal Owner Name: _____

Subject Property Address: _____

Phone: _____ Email: _____

Waiver Request Type & Amount(s):

Late Fee(s) \$ _____ Violation Fine(s) \$ _____ Other: \$ _____

Total Amount Requested To Be Waived: \$ _____

Reason: _____

By signing below, I represent I am the legal owner of the subject property address and hereby request the above amount be waived from my account. I certify that my assessment account is current, and that any violation which generated a fine has been corrected to the best of my ability. I understand this request is not guaranteed, and any amount waived is at the discretion of the board of directors.

Legal Owner Signature

Date

LEVEL OFFICE USE ONLY

Waiver Request: Approved Denied

Total Amount of Late Fees Waived \$ _____ Total Amount of Fines Waived: \$ _____

Total Amount Approved by BOD to Waive \$ _____

Board Member Signature: _____ Date: _____

Community Manager Signature: _____ Date: _____

Date Received by A/R: _____ Completed- A/R Initials: _____