

REQUEST FOR CERTIFICATE OF ASSESSMENT

Date: _____

From: Harbor Island Owners Association, 1 Harbor Dr., Harbor Island, SC 29920
843/838-5257 Telephone; 843/838-7636 Facsimile; E-mails:
Admin@harborislandoa.com, Manager@harborislandoa.com
Website: harborislandoa.com

To: _____ (Attorney)
_____ (Attention)
_____ (Mailing Address)
_____ (Mailing Address)
_____ (Telephone)
_____ (Facsimile)
_____ (E-mail)

Property Description (Lot Number and Street Address):

Seller(s) Name(s): _____

Purchaser(s) Name(s): _____

Purchaser Mailing Address: _____

Purchaser Telephone Number: _____

Expected Settlement Date: _____

Please Send Copy of Warranty Deed

ASSESSMENTS/FINES

TYPE	AMOUNT	PAID	DUE	PERIOD

Note: A \$500.00 Property Transfer Fee is charged by HIOA to be collected and remitted upon closing to HIOA. A separate check is required payable to HIOA.

Attachments: _____

FOR HIOA OFFICE USE ONLY

CONFIRMED	UPDATE HIOA	UPDATE DIRECTORY	SEND N.O.P.

Faxed back on: _____