

HOMEOWNER WAIVER REQUEST FORM

Homeowner Name: _____ Date: _____

Name of Association: _____

Address _____ Account #: _____

Type of fees requesting to be waived: Late Fees/Interest \$ _____

Fines \$ _____

Certified Postage \$ _____

Other _____ \$ _____

Total: \$ _____

Reason for waiver: _____

For Board/Management Uses Only

Approved

Denied

Reason for approval or denial: _____

_____ Date: _____

Board/Management Signature