

Newport Shores Cluster Association

RESALE CERTIFICATE REQUEST FORM

PROPERTY OWNER: _____

PROPERTY ADDRESS: _____, RESTON, VIRGINIA
20194

I, _____, OWNER ___ / AGENT ___

request a resale certificate for the NEWPORT SHORES CLUSTER ASSOCIATION according to the terms of the Virginia Property Owners' Association Act (POAA). The POAA Act requires the NEWPORT SHORES CLUSTER ASSOCIATION to release the documents **ONLY** to the owner or his/her authorized agent.

RESALE CERTIFICATE FEE: \$100.00 (Mail option additional cost: \$15.00)
(Checks should be made payable to "Newport Shores Cluster Association" or "NSCA"). Payment is required at the time of pick-up or at the time of mailing.

Disclosure packet will be picked up by: Owner ___ Agent ___

Please mail to ___owner___agent

Agent's Name, Company, Address, Email address and Telephone Number:

Owner's Name, Address, Email address and Telephone Number:

The packet will be available for pick-up or will be emailed within fourteen (14) days after we receive your request. Pick up packet from Robert Haukness, 1476 Waterfront Road, Reston, Virginia 20194. Call 703.851.4214 in advance of pick-up.

Signature of Requester: _____ Date _____

Daytime Phone: _____

*******Information below to be completed by NSCA*******

PAID BY: Personal Check _____ Certified Check _____ Money Order _____

DATE RECEIVED: _____ Date Disclosure Packet delivered: _____

REQUEST FOR DISCLOSURE PACKET MADE BY: Mail _____ Tel _____ Other _____

**Mail this request document to: Newport Shores Cluster Association, ATTN: NSCA
Treasurer, P.O. Box 3400, Reston, VA 20195**