

MEMORANDUM

TO: BUYER / SELLER – FOUR LAKES CONDOMINIUM ASSOCIATION B
FROM: EPI MANAGEMENT COMPANY, LLC
SUBJECT: UNIT SALES

Enclosed please find a sales packet which includes a copy of the current Rules & Regulations for the captioned property. Please review Section 27 of the Rules & Regulations regarding pets: “*There is a \$75.00 registration fee required for EACH dog in order to defray the cost of maintaining common areas...*” The form and registration fee are due EVERY YEAR by June 1st or there is an immediate fine of \$150. All documents must be properly completed and all payments received 48 hours in advance of the requested date indicated -

_____.
(Requested Date)

Payment

- \$250.00 non-refundable processing fee (payable to EPI Management Company, LLC)
- **A CORRECTLY COMPLETED SALES PACKET MUST BE RECEIVED 48 HOURS IN ADVANCE OF THE CLOSING** or an additional \$50.00 will be required **prior** to the issuance of the assessment letter (payable to EPI Management Company, LLC).
- \$50 non-refundable move in/out fee from both Seller and Buyer (payable to Four Lakes Condominium Association B) – Fee must be paid prior to closing.
- Should you, your agent or your attorney request a revised Paid Assessment Letter, there is an additional charge of \$75.00 per revised letter. (Check to be made payable to EPI Management Company, LLC)
- Revised letters will be issued within 48 hours of receipt of a written request for revision.

Certificates of Insurance

- Buyer - is required to submit a current Certificate of Insurance relative to property damage and fire loss for the captioned unit. The Association **does not** provide property damage insurance for the unit.
- Agent - A Certificate of Insurance may be obtained by contacting the Association's insurance agent – – John Saisi Insurance Agency – Farmers (847) 398-7608.

Documentation

- New Buyers and/or Renters must forward a completed Census Card.
- **Buyer must provide a copy of the recorded deed to EPI within fifteen (15) days of closing. Ownership changes to our records will be made only upon receipt of the recorded deed confirming the sale was finalized.**
- A copy of the sales contract must be provided to EPI **48 hours in advance of the closing.**
- The closing letter and Waiver of Right of First Refusal will be issued within seven (7) business days upon receipt of all required documentation.
- An inspection of the Unit has not been conducted for Rule Violations. Such an inspection is available to the Seller/Buyer at a fee of \$75.00 after which the Association will issue a status letter as to whether or not any rule violations exist as of the date of the inspection. The Buyer acknowledges there may be rule violations which have not been cited in the Assessment Letter. **Should you wish an inspection to be conducted (this inspection must be scheduled seven (7) business days in advance of the closing).**
- See attached Sales Instructions for additional documents **required 48 hours in advance of closing.**

Assessments

- Please indicate where you wish the assessment letter/waiver to be mailed.
- Any payments (checks and/or online payments) that the Seller wishes to have be reflected in the balance on the paid assessment letter, **MUST BE RECEIVED** in the EPI office **five (5) days** prior to the closing.
- Assessment payments must be made payable to Four Lakes Condominium Association B and mailed to c/o EPI Management Company, LLC, 14032 South Kostner Avenue, Suite M, Crestwood IL 60418.
- , LLC, as agent for Four Lakes Condominium Association B, has the capability for a direct payment system whereby your monthly assessment can be deducted automatically from your bank account. Should you be interested in ACH automatic withdrawals, please contact the management office.

Should you have any questions or concerns, please contact Monica at (708) 396-1800 x228. The sales department is available from 9:30 a.m. – 1:30 p.m. Monday – Friday.

EPI Management Company, LLC
14032 South Kostner Avenue, Suite M, Crestwood, IL 60418
(708) 396-1800 Phone / (708) 396-9831 Fax
E-Mail: epi@epimanagement.com

**FOUR LAKES CONDOMINIUM ASSOCIATION B
SALE INSTRUCTIONS**

Please complete, sign and return and/or provide the following:

1. Notice of Intent to Sell
2. Memorandum of Understanding
3. Receipt of Rules/Declaration – signed and notarized
4. Revocable Proxy
5. Census Card
6. Gas Change Form
7. One (1) complete copy of the sales contract
8. Certificate of Insurance from Buyer

NOTE:

COPY OF DECLARATION / BYLAWS AND RULES AND REGULATIONS MUST BE PROVIDED TO BUYER

EPI Management Company, LLC
14032 South Kostner Avenue, Suite M, Crestwood, IL 60418
(708) 396-1800 Phone / (708) 396-9831 Fax
E-Mail: epi@epimanagement.com

FOUR LAKES CONDOMINIUM ASSOCIATION B

NOTICE OF INTENT TO SELL

TO: _____ DATE: _____

RE: Ownership Information for Unit No. _____ Bldg. No. _____

Address: _____

Dear Sir or Madam:

As a part of any sale or transfer of a Unit at the Four Lakes Condominium Association B, the Association requires certain information be provided in order to allow the Board to effectively protect the Association's rights and interests pursuant to the Declaration and By-Laws governing the Property. Consequently, we ask that you and the prospective owner complete the enclosed information. We have also enclosed a Revocable Proxy along with a letter of explanation and an instruction sheet for completing it. The proxy should be detached, completed by the prospective owner(s) and returned with the other information.

As soon as we receive this information, we will provide the present owner with a letter showing the status of the unit's assessments and will make a determination whether to waive the Association's rights of first refusal. If you have any questions, please contact the undersigned.

Please forward this entire document and the proxy to us at the address below.

FOUR LAKES CONDOMINIUM ASSOCIATION B

C/o EPI Management Company, LLC
14032 South Kostner Avenue, Suite M
Crestwood, IL 60418
(708) 396-1800 Phone / (708) 396-9831 Fax
E-Mail: epi@epimanagement.com

NOTICE OF INTENT TO SELL

From the time the completed questionnaire and accompanying paperwork is received, the Board of Directors has thirty (30) days RIGHT OF FIRST REFUSAL after which time you will be provided with a letter indicating the Board's position on its RIGHT OF FIRST REFUSAL.

PLEASE BE ADVISED YOU MUST SUPPLY THIS INFORMATION IN ORDER TO SELL YOUR UNIT.

If the information is not supplied and the unit is sold without the Board's knowledge the Board may, under the Declaration, enforce its rights and you will be required to pay all costs and attorney's fees for the Board in so enforcing its rights.

Please forward this questionnaire and completed census card to EPI Management Company, LLC, 14032 South Kostner Avenue, Suite M, Crestwood, IL 60418.

SIGNATURE OF SELLER

SIGNATURE OF BUYER

FOUR LAKES CONDOMINIUM ASSOCIATION B

BY

TITLE

BELOW THIS LINE IS FOR OFFICE USE ONLY:

Date completed documents received by Management: _____

Received and read copy of Rules and Regulations: _____

FOUR LAKES CONDOMINIUM ASSOCIATION B

MEMORANDUM OF UNDERSTANDING

I/We, the intended Buyer(s) of the condominium unit described above declare we have read the Four Lakes Condominium Association B Declaration of Condominium Ownership and By-Laws, Easements, Restrictions and Covenants, and any Amendment or Amendments thereto and understand we shall, at all times, hold our interests in the Condominium subject to the rights, easements, privileges and restrictions therein set forth or hereafter established by the Owners or Directors of the Four Lakes Condominium Association B as duly provided for in the aforesaid Declaration of Condominium Ownership. I/We are in receipt of any and all Medico keys and fobs. I/We also acknowledge the monthly assessments are due and payable the first day of each month. I/We acknowledge we will obtain a copy of the Association's "Assessment Letter" at the closing from the Seller which denotes any current sums due to the Association and any unresolved rule violations. I/We acknowledge any existing damage due to the removal of a satellite dish installation on the unit must be restored to the units original condition otherwise the cost of restoration will be passed on to the existing unit owner. I/We acknowledge that any scratches or dents in the unit entry door are the responsibility of the purchaser. I/We acknowledge we will obtain a copy of the Association's "Residency Letter" at closing. I/We acknowledge assessment payments are to be made to the Four Lakes Condominium Association B, c/o EPI Management Company, LLC, 14032 South Kostner Avenue, Suite M, Crestwood, IL 60418. Late fees will be assessed to any payments made late per the Association's Covenants and Rules and Regulations.

SIGNATURE OF SELLER

SIGNATURE OF BUYER

I (We) hereby certify that I (we) have given the above Buyer the proper copies of the Four Lakes Condominium Association B Declaration.

SIGNATURE OF SELLER

SIGNATURE OF SELLER

DATE

**FOUR LAKES CONDOMINIUM ASSOCIATION B
RECEIPT OF DECLARATION / RULES & REGULATIONS**

BUYER'S NAME (PLEASE PRINT)

UNIT ADDRESS

TELEPHONE NUMBER

DATE OF CLOSING: _____

I/We, _____ acknowledge I/we have received a copy of the Four Lakes Condominium Association B Declaration and Rules & Regulations, and I/we have read and understood the documents. I/We also acknowledge the monthly assessment is due on or before the 1st day of each month. I/We agree to review the "Assessment Letter" which is issued to the Seller at closing which states the amount of the monthly assessment and any unit violations that should be corrected prior to closing. I/We acknowledge a late fee will be charged to our account if the monthly assessment is not paid in accordance with the Association. I/We acknowledge we will obtain the mailbox key(s) from the Seller and the Medico keys and fobs to the front entry of the building in which the unit is located (a charge for additional keys will be issued by the Association). I/We acknowledge we will obtain the parking space number allotted to the unit we are purchasing. I/We acknowledge any damage to the siding due to cables installed from satellite dishes, etc. will be the responsibility of the Owner/Buyer. **I/We acknowledge we are in receipt of the Four Lakes Condominium Association B Identification Letter.**

DATE

BUYER'S SIGNATURE*

DATE

BUYER'S SIGNATURE*

***Signature must be notarized**

County of _____

Subscribed and sworn to before me

Notary Public

DATE: _____

RE: Revocable Proxy

Dear Sir or Madam:

You are presently involved in the purchase of a unit in Four Lakes Condominium Association B. One of the problems commonly faced by Homeowner Associations is the lack of a quorum for transacting business of the Association. The Association's attorney has advised the Board if a quorum cannot be met for electing officers and conducting business, the activities of the Association (such as maintenance, landscaping or snow removal) must cease until meetings can be held at which a proper quorum is present. Thus services may cease even though your obligation to make assessment payments for those services will continue and your failure to pay assessments will create a lien against your property.

To avoid this occurrence, we ask you to sign a revocable proxy, which appoints someone of your choice to act as your proxy. It also allows the Board, by majority vote, to act for you in the event your proxy cannot attend. If you wish to vote at any meeting, your presence at the meeting will revoke your proxy for that meeting. Thus, the Board will act only where you and your proxy do not attend. The proxy may also be voided permanently at any time simply by sending a letter to the Board. This process is such as the standard procedure used when opening an account at a bank or savings and loan Association where proxy cards are signed to give the bank's Board of Directors the power to vote on behalf of the account holder.

Please sign the attached Revocable Proxy and return to the address below. We appreciate your cooperation in helping the Board to conduct the Association's business. If you have any questions, please do not hesitate to contact the Association.

Very truly yours,

FOUR LAKES CONDOMINIUM ASSOCIATION B
C/o EPI Management Company, LLC
14032 South Kostner Avenue, Suite M
Crestwood, IL 60418

INSTRUCTIONS FOR COMPLETING REVOCABLE PROXY

1. Print the name or names of the OWNER in the first blank. If the property is held in trust, this must be the trustee and not the beneficiary of the trust.
2. Print the STREET ADDRESS of the Unit in the next blank.
3. Print the name of the PROXY OF YOUR CHOICE other than yourself in the blank after the word "appoint." If there is no one you wish to appoint, fill in the blank with "X's." If you do not appoint anyone, or in the event your appointed proxy does not appear, your proxy may be cast by a majority vote of the Board, which is then in office.
4. Print the DATE, YEAR and CITY where it is completed, in the blanks at the end. The DATE is essential.
5. SIGN on the signature line or lines at the bottom. If the property is held in trust, this should be signed by an officer of the bank that is the trustee.
6. Return the signed proxy to the Association.

FOUR LAKES CONDOMINIUM ASSOCIATION B
REVOCABLE PROXY

I, _____, owner of a Unit in Four Lakes Condominium Association B, (hereinafter "Association"), commonly known by the street address of _____, Illinois, do hereby constitute and appoint the Board of Directors or _____ as primary proxy and, in the primary proxy's absence, a majority of the Board of the Association in office from time to time, or their designated substitute, to vote as my proxy at any regular or special meeting of the Association. I give my proxy full power to vote as if I were personally present, with all the powers I possess, including full power to designate a substitute and to revoke such substitution. My presence at a meeting will automatically revoke this proxy, but only for the meeting attended, unless I indicate otherwise. This proxy is intended to extend and shall extend for a period of more than eleven (11) months from the date set forth below and for so long as I remain a member of the Association, unless I revoke it before then.

Any proxy or proxies in the Association heretofore given by me to any person or persons whatsoever prior to the date below are hereby revoked. In this instrument any use of the singular includes the plural.

I understand that I may revoke this proxy at any time by sending a letter to that effect to the Board of the Association.

IN WITNESS WHEREOF, I have signed this proxy on _____, 20__, at _____, Illinois.

Owner Signature

Owner Signature

(For Association Use Only)

Unit No.

Percentage of Ownership

**FOUR LAKES CONDOMINIUM HOMES CONDO B
CENSUS CARD-- 2019**

	Owner Information	If rented, provide tenant information
Name		
Address		
Unit Number		
City, State, Zip		
Home Phone		
Cell Phone		
E-Mail Address		

Homeowner/Renter Insurance Co: _____ Policy # _____

Agent: _____ Phone: _____

List all occupants and their ages.

	Full Legal Name	Age
1.		
2.		
3.		
4.		

Name to appear on mailbox tag: _____

Phone number for front door intercom: _____

PETS? Yes No Description and weight: _____

** \$75 annual dog fee for each dog annual due by June 1st**

List all vehicles.

	Make	Color	Year	License #	Parking Space #
1.					
2.					
3.					

Contacts in case of emergency (preferably someone with a key):

Name 1: _____ Phone: Home: _____ Work: _____

Address: _____

Name 2: _____ Phone: Home: _____ Work: _____

Address: _____

I hereby acknowledge all information on this card is valid and authorize all Association notifications to be sent to my email address noted on this card, rather than by hard copy. I consider all such communication to be adequate notice of Association issues. If there are any changes in the future, I will agree to notify the Association in writing.

Owner's Signature _____ Date: _____

EPI Management Company, LLC
14032 South Kostner Avenue, Suite M
Crestwood, Illinois 60418
FAX: (708) 396-9831
E-Mail: epi@epimanagement.com

**FOUR LAKES CONDO B
GAS CHANGE FORM**

UNIT ADDRESS: _____

TO BE COMPLETED BY SELLER:

SELLER

NAME: _____

FORWARDING ADDRESS: _____

**Sellers
Signature:** _____

TO BE COMPLETED BY BUYER:

BUYER

NAME: _____

MAILING ADDRESS: _____
(if different from unit) _____

Please note that gas bills must be sent to the unit owner. They may not be sent to a tenant.

**Buyers
Signature:** _____

FOR ASSOCIATION INTERNAL USE ONLY

CLOSING DATE: _____

NOTIFY SMS READ METER: _____

FINAL METER READING: _____

DATE OF FINAL READING: _____

INITIALS: _____

BILLING TEMPLATE UPDATED: _____

date _____ **initials** _____

STORAGE LOCKER CANCELLATION

Please note that in order to cancel a storage locker agreement with the Association, this form must be completed and returned to EPI Management Company a **minimum** of 15 days before the effective date of cancellation. Also note that it is the responsibility of the Unit Owner to withdrawal from the ACH program should the leasing charge be automatically withdrawn every month.

Property Name: _____

Owner's Name: _____

Unit Address: _____

Locker No.: _____

Effective Date of Cancellation: _____

Reason for Cancellation: _____

Is the lease amount deducted every month through the ACH Program? If so, by checking the 'Yes' box you hereby authorize the cancellation of the automatic withdrawal of the parking lease charge. (Withdrawal will **only** be for the storage locker charge, not the monthly assessment.)

YES

NO

DATE: _____

Owner Signature: _____

REMINDER - STORAGE LOCKER KEYS NEED TO BE MAILED BACK TO EPI MANAGEMENT OTHERWISE YOU WILL BE CHARGED BACK FOR THE KEYS TO THE LOCKER. (2) LOCKER KEYS AND (1) MAIN DOOR KEY TO BE RETURNED.

*Professionally Managed by:
EPI Management Company, LLC
14032 South Kostner Avenue, Suite M • Crestwood, IL 60418 • (708) 396-1800 • Fax (708) 396-9831
E-Mail: jenny@epimanagement.com*

PARKING LEASE CANCELLATION

Please note that in order to cancel a parking lease agreement with the Association, this form must be completed and returned to EPI Management Company a **minimum** of 15 days before the effective date of cancellation. Also note that it is the responsibility of the Unit Owner to withdrawal from the ACH program should the leasing charge be automatically withdrawn every month.

Property Name: _____

Owner's Name: _____

Unit Address: _____

Parking Space No.: _____

Effective Date of Cancellation: _____

Reason for Cancellation: _____

Is the lease amount deducted every month through the ACH Program? If so, by checking the 'Yes' box you hereby authorize the cancellation of the automatic withdrawal of the parking lease charge. (Withdrawal will **only** be for the parking lease charge, not the monthly assessment.)

YES

NO

DATE: _____

Owner Signature: _____

User Registration and Initial Login

The first step for a user to gain access to the portal is registering. To register they need to click on the "Register Now" link on the portal's login page.

The user will be asked to enter their e-mail address, name,

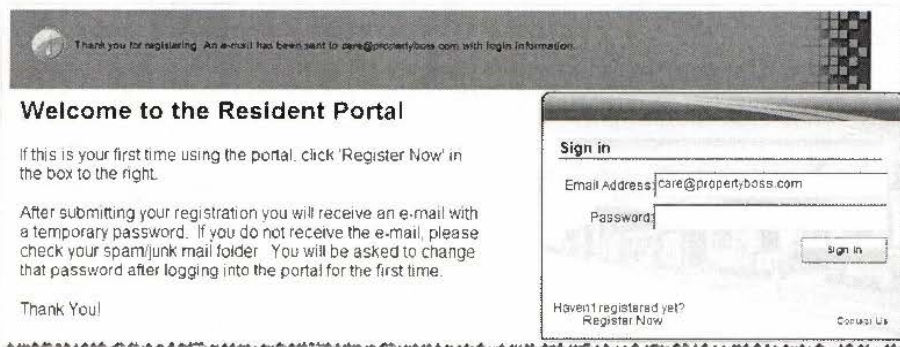
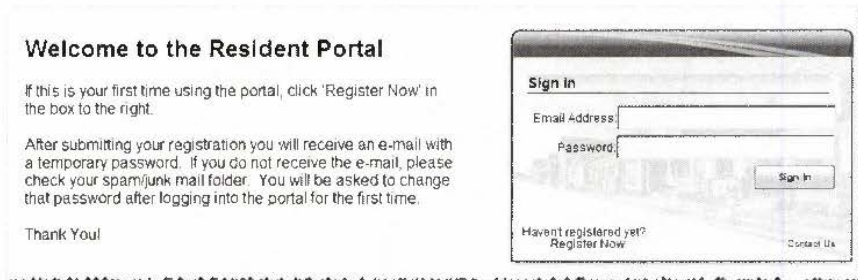
phone number. There's also a field to enter the Property/Unit if the user is a resident. If the user is an owner the field will be for the company name. They can enter their name, if they're an individual and not a company. Vendors will enter their company name.

Field Label according to portal:

- Resident/Member - Property/Unit
- Owner – Company Name
- Vendor – Vendor Name

Once they fill in the required fields and hit submit, they will get the following message.

"Thank you for registering. An e-mail has been sent to user@emailaddress.com with login information"



Portal User Registration

The user will receive an e-mail like the one shown below with their temporary password after registration.



If their e-mail address is already in PropertyBoss they will be able to login immediately. They will be required to change their password.

Hovering over the "?" icon displays the list of acceptable Special Characters as shown below. The reason for the password requirements is added security. As you create the password and it meets each requirement the circle turns green.

