

# HIDDENBROOK HOMES ASSOCIATION- DISCLOSURE PACKET REQUEST FORM

E-mail to: Hiddenbrook\_Homes@hotmail.com

Mail this form to:

Spectrum Property Management

-OR-

PO BOX 1562

Great Falls, VA 22066

**Build and send a Disclosure Package for the referenced property below:**

Settlement Date: \_\_\_\_\_ Seller's Realtor: \_\_\_\_\_

**SELECT YOUR ORDER**

**Property Inspection (required)**

**AND**

**Full Resale Disclosure Packet**

**Resale Disclosure Update (only to update Full Packet orders processed within the last 12 mo)**

**Please expedite (7 days)**

Seller (Owner) Requesting Packet: \_\_\_\_\_

Property Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Delivery Options (check one):  **Electronic (E-mail)**  **Regular Mail**  **Hard copy pick up**

\_\_\_\_\_ Mail Disclosure Package to (provide regular US mailing address):

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Resale Disclosure Fees-** Payable to Spectrum Property Management

**\$75 Property Inspection (required)**

**\$145 Resale Disclosure Documents (electronic)**

**\$175 Resale Disclosure Documents (paper)**

**\$55 Resale Disclosure Update**

**\$55 Expedited Fee (7 days)**

By signing below, I acknowledge and understand that the resale documents are being provided as a service and as such, payment must be made regardless of whether or not the sale of the property is completed. I acknowledge that if payment is not made by the seller at closing sooner than 60 days from the date of this request, the seller or their agent will promptly provide payment 60 days from the date of this request.

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Seller or Authorized Agent