

RESALE UPDATE AND REQUEST FOR CERTIFICATE

DATE: _____

TO: _____

FAX: _____ PHONE: _____

FROM: SUHRCO Residential Properties, L.L.C.
Attn: Annette Cox
2010 – 156th Avenue NE, Suite 100/Bellevue, WA 98007
Phone: (425) 455.0900 Fax: (425) 462.1943

How much is a Resale Certificate and how soon can I get it?

Our goal is to provide accurate information as quickly as possible. Under Washington State Condominium law (64.34.425), your request for a Resale Certificate must be responded to within ten (10) business days **after receipts of the request and fee**. SUHRCO Residential Properties, LLC endeavors to maintain an eight (8) business-day turnaround for Resale Certificate requests. All written or completed form requests and a fee of \$150.00 (\$10.00 additional postage fee if mailed) must be either in our office or submitted via our website at www.suhrco.com. All Resale Certificates will be processed once funds and this request form are received. The completed Resale Certificate will be prepared, reviewed by the Association Accountant and Property Manager and distributed in accordance with your instructions. Please indicate all representatives and/or agents that may pick up the completed certificate. The Certificate will only be released to those individuals indicated by you, the seller.

What is a Resale Certificate and why must I provide it to the Buyer?

The Washington State Law (RCW 64.34.4245) mandates that the Seller of a condominium unit review and sign a Resale Certificate and provide it with accompanying documents and exhibits to anyone making a bona fide offer on a unit. Once the information is in the Buyer's possession, the Buyer has five (5) days to review the information and to determine whether or not they will proceed with the purchase of the unit.

By statute, the Resale Certificate includes the Declaration and Amendments, Bylaws, Articles of Incorporation, Rules and Regulations, most current financial statement, insurance information, management agreement and most recent Board of Directors' meeting minutes.

The first five pages of the Resale Certificate discloses information regarding assessments, fees, fines, delinquencies, anticipated repairs and replacement, status of the reserve account, judgments and suits, occupancy ratio, rental caps, phasing, conversion status, homeowner and developer control as well as the balance of the Seller's account relative to dues and special assessments.

**REQUEST FOR A CONDOMINIUM RESALE CERTIFICATE OR A CONDOMINIUM RESALE
CERTIFICATE UPDATE**

FULL CERTIFICATE _____ UPDATE ONLY _____ If Update, date of original Certificate _____

(Please check one of the above boxes)

Pursuant to Washington State Condominium Law (64.34.425), I request that SUHRCO Residential Properties, LLC managing agent of the homeowners' association named below, provide the Resale Certificate and statutory accompanying documents to me in order to sell my unit. I acknowledge that the Association and/or its agent is permitted ten (10) days from receipt of written request AND payment of \$150.00 in which to provide the Resale Certificate.

I understand that the Owner's signature and \$150.00 are required prior to preparation of the Resale Certificate. I understand that the Resale Certificate will only be released to the Seller or a person designated by the Seller. I also acknowledge that I must review and sign the Resale Certificate before it is passed to the Buyer. I also understand that it is in my own best interest to have the prospective Buyer sign and return a copy of the signature page to me.

DESCRIPTION OF UNIT

Condominium/Association Name: _____

Street Address _____

City _____

Unit number _____

DELIVERY INSTRUCTIONS

PICKUP: Resale Certificates will only be released to those person(s) authorized by the Seller. Please list all those person(s) authorized to pick up the certificate and their telephone numbers.

Name _____

Telephone Number _____

MAIL TO: \$10.00 ADDITIONAL REQUIRED FOR POSTAGE

Name _____

Address _____

City & State _____

Unit Owner (Seller's) PRINTED Name _____

Unit Owner (Seller's) SIGNATURE _____

MAIL OR DELIVER REQUEST FORM TO

*SUHRCO Residential Properties, LLC
2010 156th AVE NE, Suite 100
Bellevue, WA 98007*

FOR SUHRCO USE ONLY

Payment Received by: _____ Check # _____ \$ _____ Date of Check _____

Prepared by: _____ Date of Completion _____