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## SUHRCO Residential Properties, L.L.C.

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Welcome to SUHRCO Residential Properties! As your community's managing agent, our goal is to assist your Board of Directors in creating a viable community, worthy of your investment, and a pleasant place in which to live.

In accordance with Washington State law, the seller(s) of your unit were required to provide you with a Resale Certificate, prior to closing. The Certificate and its attachments answer many questions about living at Your home. We encourage you to read it and each of its attachments. Especially familiarize yourself with the Declaration of Covenants, Conditions, & Restrictions, the Bylaws, and the Rules & Regulations. These documents have been expressly drawn up to protect the value and livability of your community. Collectively, they are known as the Governing Documents. Please, if you have not already done so, review them now to avoid unpleasant surprises later!

Your Board of Directors is legally empowered, by the Governing Documents, to control the affairs of your Association. The Board is made up of people who were elected by a majority of owners from your Association. Your Board has chosen to delegate the day-to-day operations of your community to us, **SUHRCO Residential Properties, L.L.C.**, your Community Association Managers.

Our role is to assist the Board in keeping the Association's promises to you (as detailed in the Governing Documents), and vice versa. We'll help protect your investment by managing the commonly owned elements of the community according to Board policies. We'll help maximize your Association's budget by recommending competitively priced and competent suppliers to do the work. We'll help your Board plan for future needs, and much more.

We also manage the collection of the monthly operating and reserve assessments, which are due in one combined payment on the first day of each month. No monthly invoices are sent. Please make checks payable to your condominium and mail them directly to P.O. Box 34960, Seattle, WA 98124. Instructions, coupons for the remainder of the year and envelopes are enclosed for your convenience. Automatic withdrawal is also an option; the form to sign up for automatic withdrawal is enclosed.

If there is a new owner (or if the unit is rented or leased) you are required to complete an Owner/Resident Information form. Please complete the enclosed form and return it to **SUHRCO Residential Properties, L.L.C.**, as soon as possible.

We appreciate the opportunity to help ensure that your home will be a good investment and a welcome place for you, your family and guests. If you ever have a question or concern, please feel free to call.

SUHRCO Residential Properties

**AUTHORIZATION AGREEMENT FOR PREAUTHORIZED PAYMENTS**

I (we) hereby authorize **SUHRCO Residential Properties, L.L.C.**, hereinafter called **COMPANY**, to initiate debit entries to my (our) bank account indicated below and the depository named below, hereinafter called DEPOSITORY, to debit the same to such account on the **fifth** day of each month.

**DEPOSITORY** - (Name & Address of authorizer's bank/credit union)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Please include a voided check to verify the following information:**

**TRANSIT/ABA NO.** \_\_\_\_\_ **ACCOUNT NO.** \_\_\_\_\_

**This is a: Checking Account**  **Savings Account**

This authority is to remain in full force and effect until COMPANY and DEPOSITORY have received written notification from me (or either of us) of its termination in such time and in such manner as to afford COMPANY and DEPOSITORY a reasonable opportunity to act on it.

The undersigned hereby agrees that the monthly deduction may be increased or decreased to pay the proper monthly assessment as approved by the Board of Directors. The undersigned also agrees and understands that this service is being offered only as a convenience by the COMPANY. The undersigned further agrees to indemnify, defend, and hold COMPANY harmless from any and all claims that may arise as a result of debit entries being made from their checking account.

NAME (S) \_\_\_\_\_ Property Name: \_\_\_\_\_  
(Please Print)  
Unit Number: \_\_\_\_\_  
Monthly Assessment: \_\_\_\_\_  
Start Date: \_\_\_\_\_

DATE \_\_\_\_\_ New ACH Setup

SIGNED \_\_\_\_\_ Change Existing ACH

*Forms received in our office by the 25<sup>th</sup> of the month will be processed for the upcoming month's dues payment; forms received after the 25<sup>th</sup> of the month will be processed for the following month's dues payment.*

**Please return completed form with copy of voided check to:**  
**SUHRCO Residential Properties, LLC ■ 2010 – 156<sup>th</sup> Ave NE Ste 100 ■ Bellevue WA 98007**  
**Fax (425) 462-1943**

## **ASSESSMENT PAYMENT INSTRUCTIONS AND OPTIONS**

TO: Homeowner  
FROM: SUHRCO Residential Properties, LLC

Items of Note Regarding Lockbox Payments:

- 1) Make your check payable to your Condominium Association. (Checks made payable to a name other than your Association will be returned to you as the bank will not process payment.)
- 2) Enclose a payment coupon (will be sent via regular US mail) with your check.
- 3) In accordance with the late charge policy established by your governing Documents, payments must be received no later than the date indicated on the payment coupon to avoid a late payment assessment.
- 4) Do not send any other mailing or correspondence with your monthly payment. KeyBank will not forward your correspondence to our office.

### **Payment Mailing Address**

Your Association Name  
% SUHRCO Residential Properties, LLC  
PO Box 34960  
Seattle, WA 98124-1960

### **Correspondence Mailing Address**

Your Association Name  
% SUHRCO Residential Properties, LLC  
2010 156<sup>th</sup> Avenue NE, Suite 100  
Bellevue, WA 98007

## **PAYMENT OPTIONS**

At this time, your Association offers the following additional payment options:

### **Online Bill Pay**

Payments may be made through your bank's online billpayer program. Should you choose this option, you will use your condominium as your vendor. (Checks made payable to a name other than your Association will be returned to you.) Use the Payment Mailing Address shown above. In the ACCOUNT field of your check, please reference the account number located in the upper right hand corner of your payment coupons. Please allow ample time for your bank to process and mail your payment to avoid a late charge.

### **Automatic Payment Withdrawal (ACH)**

Payments may be automatically withdrawn from your account on the 5<sup>th</sup> of each month. If you choose this option, please complete the enclosed Authorization Agreement for Preauthorized Payments form. Attach a voided check and mail directly to our Bellevue office at the Correspondence Mailing Address listed above.

*Please feel free to contact your Property Accountant if you have any questions regarding monthly assessment payment options. 425-455-0900*

**SUHRCO Residential Properties, L.L.C.**  
**OWNER/RESIDENT INFORMATION**

"PLEASE PRINT OR TYPE"

Date \_\_\_\_\_

Property/Association \_\_\_\_\_

Unit/Lot # \_\_\_\_\_

Owner: \_\_\_\_\_

Phone # (H) \_\_\_\_\_

\_\_\_\_\_

Phone # (W) \_\_\_\_\_

E-Mail \_\_\_\_\_

Mailing

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

\_\_\_\_\_

\_\_\_\_\_

Emergency

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

Phone # \_\_\_\_\_

Info to be displayed in the entry system: Name \_\_\_\_\_ Phone #: \_\_\_\_\_

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PLEASE COMPLETE THIS SECTION ONLY IF UNIT IS RENTED OR LEASED!

Tenant(s) or \_\_\_\_\_

Phone # (H) \_\_\_\_\_

Occupant(s)

\_\_\_\_\_

Phone # (W) \_\_\_\_\_

\_\_\_\_\_

Phone # (W) \_\_\_\_\_

Unit

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

***IF UNIT IS RENTED, A COPY OF THE LEASE AGREEMENT MUST BE ATTACHED!***

OCCUPANT INFORMATION:

**Vehicle(s)** Year \_\_\_\_\_ Make/Model \_\_\_\_\_ Color \_\_\_\_\_ License \_\_\_\_\_ State \_\_\_\_\_

**Parked at**

**Property** Year \_\_\_\_\_ Make/Model \_\_\_\_\_ Color \_\_\_\_\_ License \_\_\_\_\_ State \_\_\_\_\_

Year \_\_\_\_\_ Make/Model \_\_\_\_\_ Color \_\_\_\_\_ License \_\_\_\_\_ State \_\_\_\_\_

**Pet(s)** Name \_\_\_\_\_ Species \_\_\_\_\_ License # \_\_\_\_\_ Color \_\_\_\_\_ Size \_\_\_\_\_

Name \_\_\_\_\_ Species \_\_\_\_\_ License # \_\_\_\_\_ Color \_\_\_\_\_ Size \_\_\_\_\_

**LENDOR NAME, ADDRESS, & PHONE # ARE REQUIRED FOR PROPERTY MANAGEMENT FILES:**

Mortgage Co: \_\_\_\_\_

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

*MAIL TO: SUHRCO RESIDENTIAL PROPERTIES, L.L.C.*  
2010 156<sup>th</sup> Ave NE Suite 100, Bellevue, WA. 98007  
(425) 455-0900 Fax: (425) 462-1943