



Community Management

The Thistle Landing Office Park
Suite # 100
4809 E. Thistle Landing Drive
Phoenix, AZ. 85044

Association Documents Records Request

Pursuant to ARS § 33-1805 (planned communities and ARS § 33-1258 (condominiums) for Books and Records Access

Instructions! Please read carefully!

Print CLEARLY and LEGIBLY and initial and sign in all indicated required areas. Incomplete or illegible forms will be rejected. Mail via USPS **ALL 6** (six) pages to the above mailing address even if they do not pertain to your request. Electronic Mail (e-mail) submissions of this document AND requested documents are prohibited.

I certify _____ (legal first and last name), that I am a Member/Homeowner _____ (initial) **OR** Designated Representative _____ (initial) making this request of the _____ Homeowners Association.

Legal Name of requestor, address and lot/unit # listed on the Warranty Deed listed with the Maricopa County Recorder's Office:

Name: _____

Address: _____

Lot or Unit #: _____

City, State, Zip Code: _____

Primary Contact Telephone Number: _____

Please select 1(one) of the following:

A) I prefer to come by the Association Management office of EquinoxONE Community Management located in the Thistle Landing Office Park, at 4809 E. Thistle Landing Drive, Phoenix, AZ. 85044 on _____, 20__ at _____ AM/PM or another convenient day.

_____ (initial)

OR

B) I prefer to have the requested documents mailed to me via USPS at the following address:

_____ (initial)

I request to have copies of the following documents for the Association named above:

Exhibit A

Owner Summary/Membership List Request

I hereby do solemnly swear and avow that:

Initial ALL of the following:

_____ I will not use the list or any part for any purpose unrelated to a Member's interest as a Member of the Association.

_____ I will not use the list to solicit money or property.

_____ I will not for any commercial purpose.

_____ I will not sell it to any person.

I _____ (signature) will use it for 1(one) of the following:

Select 1 (one) of the following with your initials.

a) _____ I will use requested documents for the sole and specific purpose of communicating with the Membership for a scheduled Meeting on _____ 20____.

OR

b) _____ I will use it for the following Association related business described with reasonable particularity directly connected to the stated purpose.

Describe nature of Association business for which document is to be use:

(use additional sheets if necessary)

I do not wish to obtain a copy of the Owner Summary roster of record (*initial*) _____

Exhibit B

Accounting Records Requests

Accounting Records (be specific) _____

I will use the requested documents for the following Association related business described below with reasonable particularity directly connected to the stated purpose. _____ (*initial*)

Describe nature of Association business for which document is to be use: (*use additional sheets if necessary*)

Most recent financial Records _____

I will use the requested documents for the following Association related business described below with reasonable particularity directly connected to the stated purpose. _____ (*initial*)

Describe nature of Association business for which document is to be use: (*use additional sheets if necessary*)

I do not wish to obtain a copy of any Accounting Records (*initial*) _____

Exhibit C

Other Association Records

_____ (initial) Minutes for HOA Board Meeting for this exact date: _____

_____ (initial) Record of Action In Lieu of a Meeting regarding: _____

_____ (initial) Records of Committee Action related specifically to: _____

_____ (initial) Current duly recognized Board of Directors and Officers names and business addresses.

_____ (initial) Most recent Annual Report.

_____ (initial) Other record of the Association as specifically described below:

I will use the requested documents for the following Association related business described below with reasonable particularity directly connected to the stated purpose. _____ (initial)

Describe nature of Association business for which document is to be use: *(use additional sheets if necessary)*

I do not wish to obtain a copy of any of the aforementioned on this page (initial) _____

I understand all appropriate mailing and copy costs will be assessed to my account. I hereby acknowledge that the Association will charges 15¢/ page for copies and all documents to which I request copies.

Signature _____

Name (print): _____

Date: _____