

INVERRARY WEST RESALE INSTRUCTIONS

Congratulations on the sale of your home. Please follow these instructions carefully to ensure the timely and accurate closing of your unit. The following procedures are necessary for the completion of a Paid Assessment letter and/or 22.1.

By requesting any information from this site, the unit owner allows the release of information requested by the above listed parties on the unit, and accepts any responsibility for any incorrect information which may result in reprocessing or additional fees thereof.

All assessments or balances MUST be paid through the month of closing payable to INVERRARY WEST. The final assessment payment is to be made in the form of certified funds, no personal checks accepted due to time sensitivity. Please forward this payment to Williamson Management, 215 William Street, Bensenville, IL 60106. **After ALL PAYMENTS have been made and cleared by the bank, a release letter will be issued.**

You must pay for items through this web site by credit card or check and use the Georgia address to send payment ONLY. All documents & deposits must be sent to Williamson Mgmt, 215 William Street, Bensenville, IL 60106.

As part of your closing process, you must provide the buyer with the following items. If you are missing any items that Management can replace, you may purchase them from this site if available.

- Declarations and Bylaws
- Rules & Regulations
- Unused monthly assessment coupon book
- Mailbox and house keys (replacement not available from management)

You must purchase the paid assessment letter through this site and any further resale documents you may need, please make sure you provide the completed release form which is below & contract pages (1st pg & signature pg only).

A \$50.00 move out deposit & move out form is required from the seller made payable to Inverrary West and sent to Management along with move out form. The parking passes must also be returned to Management, even if they come off in pieces.

Any request from you, Realtors, attorneys, or the mortgage company for specific documents or other items required for your closing other than the items listed for purchase on this site, must be submitted in writing to our office. Please email any requests to phorbach@williamsonmanagement.com

The attached release form, copy of contract (1st pg & signature pg only), deposit, move out deposit form & parking pass MUST be returned to Management before a paid assessment letter will be released.

Please fax or email documents to 630-238-3188 or phorbach@williamsonmanagement.com. If sending them by mail please mail to Williamson Management, 215 William Street, Bensenville, IL 60106.

If you have any questions please email phorbach@williamsonmanagement.com with your questions.

Thank you and best wishes.

RELEASE FORM

ASSOCIATION _____

UNIT # _____

*****PLEASE PRINT & DO NOT RETURN UNTIL ALL INFORMATION IS COMPLETED.**

ADDRESS: _____

SELLER: _____

SELLER'S NEW ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

SELLER'S PHONE # (CELL): _____ (HM/WK) _____

BUYER: _____

BUYER'S CURRENT ADDRESS: _____

BUYER'S PHONE # (CELL): _____ (HM/WK) _____

CLOSING DATE: _____

SELLER'S ATTORNEY: _____ EMAIL _____

PHONE # _____ FAX # _____

ADDRESS: _____ CITY _____ STATE _____ ZIP: _____

SELLER'S REALTOR: _____ PHONE #: _____

SELLER'S REALTOR EMAIL _____

WILL THIS UNIT BE A RENTAL UNIT? YES _____ NO _____

OFF SITE ADDRESS: _____

FOR OFFICE USE ONLY

VIOLATIONS CLOSED _____

UNIT TRANSFERRED _____

RENTER'S DELETED IF NECESSARY _____

CURRENT BALANCE TO BE TRANSFERRED _____

FOR SELLER

**MOVING DEPOSIT RETURN FORM
(PLEASE PRINT OR TYPE)**

ASSOCIATION _____

PROPERTY ADDRESS: _____

SELLER'S INFORMATION:
FOR RETURNING DEPOSITS **AMOUNT \$** _____

SELLER'S NAME: _____

SELLER'S PHONE # _____

MOVE OUT DATE _____

CHECK PAYABLE BACK TO _____

ADDRESS TO RETURN DEPOSIT TO: _____

CLOSING DATE OF UNIT _____

Please return form with deposit to: Williamson Management, 215 William Street, Bensenville, IL 60106. Check must be payable to your Association.

-----**OFFICE USE ONLY BELOW**-----

DATE B/M RELEASED _____

ASSOCIATION: _____ **ACCT #** _____

GL CODE: # _____ **AMOUNT \$** _____

MOVE-IN _____ **OR** **MOVE-OUT** _____