ity Services: ash Pick-up Day Recycling Pick-up Day ard Waste Pick-up Day ervices Provided By:			, ,
	Annual / Quart	· ·	y (circle one)
Name of HOA Manag	gement Company:		
Contact Name:	Phone:		Email:
Average Monthly Utili	ities		
Electricity:	Low\$		High \$
Gas:	Low\$		High \$
Water:	Low\$		High \$
Pool:	Low\$	 -	High \$
rash:	Low\$		High \$
·looding			
Has the home previously flooded		Yes	No
Do you carry flood insurance		Yes	No
What is your annual fl	lood insurance premiu	m	
Please list any update	es and upgrades mad	e to your Hom	e (include date):