

WILLIAM DOUGLAS MANAGEMENT CO.

P.O. Box 37109 • Charlotte, NC 28237 • Phone: 704/347-8900 • Fax: 704-377-3408

Request for Payment Plan Agreement Terms and Instructions

You have contacted our office and inquired as to the possibility of paying the outstanding balance you owe to your Association in installments. In order to assist you in submitting your request, should you decide to do so, we are providing you with instructions that must be followed and the terms that must be accepted for the Association to consider your request.

Requests will not be considered until it is received in writing.

Owner(s) Full Name:

Property Address:

Association Name:

Account Number:

Email Address & or Contact #:

ATTENTION: Please read the terms and instructions carefully. If you do not comply with all of the given instructions and terms we will not be able to process your payment plan request.

1. Please read the information below regarding your request:
 - a. I understand that neither the Association nor I/We are obligated to offer or accept a Payment Plan Agreement.
 - b. I understand that the Association can proceed with enforcement action until a Payment Plan Agreement containing terms acceptable to both me/us and the Association is signed and delivered to William Douglas Management Company, along with the Initial payment, or until full pay-off of my obligation is delivered
 - c. I understand that my request will be sent to the Board of Directors for its consideration and that the Board may decline, accept, or propose alternative terms acceptable to the Association.
2. Your request must specify a proposed initial payment to be made at the time an agreement is signed and the amount of each proposed installment to be paid each month. You are encouraged to propose the highest initial payment and installment payments that you can make **in addition to assessments and other charges which may come due in those months.**

Proposed Initial Down Payment and Start Date: \$ _____

Indicate the date you are requesting your proposed down payment to begin: ____ / ____ / ____

Proposed Monthly Installment Amount: \$ _____ *(this amount does not include assessments which may come due during the term of a payment plan)*

3. You must specify the reason or justification (hardship) for your request.

4. This completed form must be submitted to our office & returned to Collections Administrator either via E-mail (Collections@wmdouglas.com), mail (4523 Park Road, Suite 201 A Charlotte, NC 28209), or Fax (704-377-3408).

5. **Requests will not be considered until it is received in writing**