**Estoppel or Questionnaire Request Form**

DATE: SETTLEMENT DATE:

The following information is required for our office to process an Estoppel Certificate or Questionnaire. The package includes: the Estoppel Certificate or Questionnaire, a current ledger, any pending violations or liens on the property.

**NOTE:** FORM MUST BE FILLED OUT IN ITS ENTIRETY BEFORE PROCESSING WILL BEGIN

Include check, made payable Icon Management Services with your request. Payment must be received before paperwork processing will begin. Copies of checks will not be accepted as valid payment. Fees are not collected at time of settlement. The Estoppel Certificate or Questionnaire will be invalid if payment is not honored.

# Property Information

Street Address:

Association Name:

Seller’s Full Name:

# Buyer

Buyer’s Full Name: \_ Co-Buyer’s Full Name:

Buyer’s Address:

Buyer’s Phone #: Fax #:

Email:

# Delivery Information

Requested By: Phone #:

Business Name (if applicable): \_ Fax #: Phone #:

City: State: Zip:

# Processing

**Estoppel or Questionnaire Package:**

* Standard Processing $150 (PER ASSOCIATION)

# Payment Information

* Check Enclosed (mailed requests only) Check Number: