

MEMORANDUM

TO: BUYER/SELLER, BLOOMFIELD CLUB II HOMEOWNERS ASSOCIATION
FROM: EPI MANAGEMENT COMPANY, LLC
SUBJECT: UNIT SALES

Per your request, enclosed please find a Sales Packet for the above captioned property, which includes a copy of the current Rules & Regulations. Note all items must be completed and returned to this office with a copy of the sales contract. You may fax these items to EPI Management Company, LLC at the number listed below. All documents must be properly completed and all payments received 48 hours in advance of the requested date indicated - _____.

(Requested Date)

Also required is a non-refundable \$175.00 check payable to EPI Management Company, LLC for processing. If the correctly completed sales packet is not received **48 hours in advance of the closing**, an additional \$50.00 (check to be made payable to EPI Management Company, LLC) will be required **prior** to the issuance of the assessment letter. Should you, your agent or your attorney request a revised Paid Assessment Letter, there is an additional charge of \$75.00 per revised letter. (Check to be made payable to EPI Management Company, LLC). Revised letters will be issued within 48 hours of receipt of a written request for revision.

Note that an inspection of the Unit has not been conducted for Rule Violations. Such an inspection is available to the Seller/Purchaser at a fee of \$75.00 after which the Association will issue a status letter as to whether or not any rule violations exist as of the date of the inspection. The Purchaser acknowledges that there may be rule violations that have not been cited in the Assessment Letter. Please contact Monica in the Administrative Department at 708-396-1800 Extension 28 if you wish such an inspection to be conducted (note that this inspection must be scheduled 7 working days in advance of the closing).

Purchaser is required to submit a current certificate of insurance relative to property damage and fire loss for the captioned unit. The Association **does not** provide property damage insurance for the unit; therefore, the purchaser must obtain and keep in full force Homeowner's Insurance coverage. Condominium Insurance does not provide the proper coverage for the unit and will not be accepted.

Once these items are received at EPI Management Company, LLC, the closing letter will be issued within seven (7) working days. Please indicate where you wish the assessment letter/waiver to be mailed. **A recorded deed must be received by Management within 15 days of closing in order for the ownership to be changed.**

EPI Management Company, LLC, as agent for your Association, has the capability for a direct payment system whereby your monthly assessment can be deducted automatically from your bank account. Should you be interested in ACH automatic withdrawals, please contact the management office.

If you should have any questions regarding this matter, please do not hesitate to contact Monica in Administrative Department at (708) 396-1800 ext. 28. The sales department is available from 9:30 a.m. – 1:30 p.m. Monday – Friday.

EPI Management Company, LLC
14032 South Kostner Avenue, Suite M
Crestwood, IL 60445
(708) 396-1800 ext. 28 (8:30 AM to 12:30 PM Monday through Friday)
Fax: (708) 396-9831

**BLOOMFIELD CLUB II HOMEOWNERS ASSOCIATION
RECEIPT OF RULES/DECLARATION**

BUYER'S NAME (PLEASE PRINT)

UNIT ADDRESS

TELEPHONE NUMBER

DATE OF CLOSING: _____

I/We, _____ acknowledge that I/we have received a copy of the Bloomfield Club II Homeowners Association Rules and Regulations and Declaration, and that I/we have read and understood these documents. I/We also acknowledge that the monthly assessment is due on or before the 1st day of each month and that a \$40 late fee will be charged for any assessment payment received after the 20th day of the month for which the payment was due. I/We agree to review the "Assessment Letter" which is issued to the Seller at closing which states the amount of the monthly assessment. As of February 6, 2008, all units must be owner/family occupied; no leasing of units is allowed. I/We acknowledge that any damage that currently exists to the garage door for this unit will be my/our responsibility to repair and not the Association's. I/We will be responsible for any existing damage to the concrete driveway for this unit due to oil or other chemical spills. I/We also acknowledge that I/We will be responsible for any repair costs that may be required by the Association for any cables, wires, and satellite dish(s) installations. Purchaser should inspect these areas prior to any closing of the sale on the Unit.

DATE

BUYER'S SIGNATURE*

DATE

BUYER'S SIGNATURE*

***Signature must be notarized**

County of _____

Subscribed and sworn to before me

Notary Public

EXHIBIT "A"

BLOOMFIELD CLUB II HOMEOWNERS ASSOCIATION
ARCHITECTURAL IMPROVEMENT APPLICATION FORM

NAME _____ DATE _____

ADDRESS _____

LOT NO. _____ TELEPHONE _____

NATURE OF IMPROVEMENT _____

COLOR _____ STYLE _____

LOCATION _____ DIMENSIONS _____

CONSTRUCTION MATERIALS _____

SUPPLIER _____ APPROX.COST _____

PLANS AND SPECIFICATIONS OF ALL IMPROVEMENTS MUST BE SUBMITTED AND ATTACHED TO THE APPLICATION TO SHOW LOCATION AND DIMENSIONS.

We, the undersigned, do hereby acknowledge that we understand the rules concerning the proposed improvement. We agree to abide by the rules set forth by the Board of Directors and will be solely liable for upkeep maintenance on this improvement.

DATE _____

SIGNED _____

(Homeowners)

FOR OFFICE USE ONLY:

APPROVED BY _____ DATE APPLICATION REC'D. _____

INSPECTED BY _____

RECEIVED BY _____

INSPECTED ON _____

DISAPPROVED BY _____

REASONS FOR DISAPPROVAL _____

Return to:

EPI Management Company, LLC

14032 South Kostner Avenue, Suite M • Crestwood, IL 60445 • (708) 396-1800 • Fax (708) 396-9831

E-Mail: epi@epimanagement.com

**BLOOMFIELD CLUB II
CENSUS CARD -- 2016**

	Owner Information	If rented, provide tenant information
Name		
Address		
Unit Number		
City, State, Zip		
Home Phone		
Cell Phone		
E-Mail Address		

Homeowner/Renter Insurance Co: _____ Policy # _____

Agent: _____ Phone: _____

List all occupants and their ages.

	Full Legal Name	Age
1.		
2.		
3.		
4.		

PETS? Yes No Description and weight: _____

List all vehicles.

	Make	Color	Year	License #	Parking Space #
1.					
2.					
3.					
4.					

Contacts in case of emergency (preferably someone with a key):

Name 1: _____ Phone: Home: _____ Work: _____

Address: _____

Name 2: _____ Phone: Home: _____ Work: _____

Address: _____

I hereby acknowledge all information on this card is valid and authorize all Association notifications to be sent to my email address noted on this card, rather than by hard copy. I consider all such communication to be adequate notice of Association issues. If there are any changes in the future, I will agree to notify the Association.

Owner's Signature _____ Date: _____

EPI Management Company, LLC
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Crestwood, Illinois 60445
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E-Mail:
epi@epimanagement.com