



Authorization For Release Of Information

To: Edgewater Management Group, Inc.
20 Prospect Street, Suite 201
Ballston Spa, NY 12020
Phone: 518.577.5403 Fax: 888.567.6784
Email: kelly.kenyon@edgewatermg.com

Refinance

SUBMIT FORM _____

Sale of Property

Closing Date: _____

From: _____

Name of potential buyer(s) or owner(s)

We have a client that has an interest in purchasing, selling or refinancing a home within an Association or Condominium that EMG is presently the Managing Agent for. We would like to ask that you prepare and submit to this office and to the specific person listed at the bottom of this form, the document(s) or information as requested below.

PREPAYMENT INSTRUCTIONS

ATTENTION: PREPAYMENT IS REQUIRED before processing of any documents or services. No processing will take place until payment is received. If you wish to pay online, go to www.edgewatermg.com. When registering, please select Edgewater Management Group, Inc. in the dropdown box. Then email or fax this completed form to our office. A Processing Fee is added to all online payments by the processor. If paying by check, please mail the completed form and a check made payable to Edgewater Management Group, Inc. to 20 Prospect Street, Suite 201, Ballston Spa, NY 12020.

Name of the Association: _____

Address of property: _____

Please place a check mark in the box or boxes that apply.

PUD or Condominium Questionnaire as attached to this request. Questionnaires will be completed for a fee of \$50.00 for a three to four business day turnaround.

Account Status Certification Letter. Certification letters will be completed for a fee of \$50.00 for a three to four business day turnaround.

Rush: We request that each document be handled on a rush basis (within two business days) at **\$25 additional for each document**.

Other services as indicated: _____
Other information including lien releases, governing documents, property history, specific research and documentation will be billed at the rate of \$75.00 per hour, \$50.00 minimum plus any additional charges such as copy fees, legal fees or other services requested.

We appreciate your help and agree to the terms and conditions as set forth above. We understand that there will be charges as indicated for each item listed. We agree to pay for each individual requested item.

Printed Name: _____ Phone: _____ Fax: _____

Signature: _____ Email: _____