Commonwealth of Virginia
Department of Professional and Occupational Regulation
9960 Mayland Drive, Suite 400
Richmond, Virginia 23233-1485
(804) 367-8510
www.dpor.virginia.gov



Common Interest Community Board
REQUEST FOR RETURN OF CONDOMINIUM ASSESSMENT BOND/LETTER OF CREDIT FORM

| Virginia Common Interest Com  | munity Board Condominium Registration Nun   | nber                                |                  |
|---|---|-------------------------------------|------------------|
| Name of Condominium Project   |   |                                     |                  |
| Name of Declarant   |   |                                     |                  |
| Declarant's Mailing Address   |   |                                     |                  |
|   | City  | State                               | Zip Code         |
| Bond Letter of Credit Number  |   |                                     |                  |
| Name of Financial Institution/S   | urety Company   |                                     |                  |
| requests return of the bond or  | 48-30-570 of the Condominium Regulations letter of credit to ensure payment of assessm § 55.1-1968 of the Code of Virginia. The Dec | ents posted with the Common Inte    |                  |
| Check only one:  The Declarant owns leading to the control of the | ess than 10% of the units in the condominium  | ı, and is current in the payment of | assessments.     |
| The Declarant only of payment of assessments  | owns one unit in the condominium which controls   | ontains less than 10 units, and i   | s current in the |
| ○ The Declarant no lone   | ger owns any units in the condominium, and is   | s current in the payment of assess  | ments.           |
| Unit Owners' Association Cont   | act Information:  |                                     |                  |
| Management Company Na<br>Contact Person/Title   | , ,   |                                     |                  |
| Association Name  |   |                                     |                  |
| Mailing Address   |   |                                     |                  |
|   | City  | State                               | Zip Code         |
| Phone Number  |   |                                     |                  |
| Email Address   |   |                                     |                  |

The Declarant certifies the information provided on this form is true and accurate, and acknowledges that providing false information or misrepresenting an affiliation with an association in seeking return of a bond or letter of credit may result in action by the Board, to include issuance of a temporary cease and desist order in accordance with § 55.1-1986 of the Code of Virginia. The Declarant further acknowledges:

1. Upon receipt of the request from the Declarant to return the bond or letter of credit, the Board will send a request to the unit owners' association to confirm the information supplied by the declarant. The person certifying the information on behalf of the unit owners' association must not be affiliated with the Declarant. The managing agent of the unit owners' association may confirm the information supplied by the Declarant.

- 2. The Board will return the bond or letter of credit to the declarant if (i) the unit owners' association confirms that the Declarant is current in the payment of assessments and owns less than 10% of the units in the condominium or (ii) no response is received from the unit owners' association within 90 days. The 90-day time frame may be extended at the discretion of the Board.
- 3. If the unit owners' association attests the Declarant is not current in the payment of assessments, the Board will retain the bond or letter of credit until evidence is received satisfactory to the board that the Declarant is current in the payment of assessments.
- 4. The Board may ask for additional information from the unit owners' association or the Declarant as needed to confirm compliance with § 55.1-1968 of the Code of Virginia

| Relationship to Declarant |  |
|---------------------------|--|
| Printed Name of Signatory |  |
| Signature                 |  |
| •                         |  |

THIS FORM MAY ONLY BE EXECUTED BY THE DECLARANT OR ITS AUTHORIZED AGENT.