



HOMEOWNERS/PROPERTY OWNERS ASSOCIATION PROFILE SHEET

DATE UPDATED _____

Are there multiple Associations concerning the same Condo/Subdivision? ☐ Yes ☐ No
(If yes attach a separate form for each HOA/POA)

Recorded name of HOA/POA: Twin Peaks POAType of HOA/POA: ☐ Condominium ☐ Subdivision ☐ Other _____
☐ Includes Planned Unit Development OwnershipMembership mandatory? ☒ Yes ☐ NoIs Condominium/Subdivision located in Municipal Utility District? ☐ Yes ☐ No

If yes, list name of MUD: _____

If this is a condominium community, is it: ☐ Original Development ☐ Apartment conversion ☐ OtherIs Condominium: ☐ VA Approved ☐ FHA ApprovedIf Condominium - Is a "Right of First Refusal" required by the association? ☐ Yes ☐ NoAssociation Fee \$ 200.00 Payable: ☐ Monthly ☐ Quarterly ☒ YearlyTransfer Fee \$ UNSURE Mandatory Deposits of any kind due at closing? ☐ Yes ☐ No

Resale Certificate Neighborhood Docs Fee \$ _____

Payable by: ☒ Buyer ☐ SellerAre there any fees/assessments/special assessments of any kind? ☐ Yes ☒ No

If yes, what are they? _____

Name of HOA/POA Management Co.: Twin Peaks POAPhysical Address: 112 Sattler Rd. Website: _____Contact Person: Tom Williams Phone: _____ Email: tom.w@agi-tx.com

Amenities/Services provided by the HOA/POA

Check all that apply:

I have no idea what these people do.

<input type="checkbox"/> Swimming Pool	<input type="checkbox"/> Basketball Court	<input type="checkbox"/> Party/Meeting Rm.	<input type="checkbox"/> Fire Protection	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Hot Tub	<input type="checkbox"/> Baseball Court	<input type="checkbox"/> Gas	<input type="checkbox"/> Pest Control	_____
<input type="checkbox"/> Sauna	<input type="checkbox"/> Volleyball Court	<input type="checkbox"/> Electricity	<input type="checkbox"/> Garbage Pickup	_____
<input type="checkbox"/> Club House	<input type="checkbox"/> Soccer Field	<input type="checkbox"/> Water	<input type="checkbox"/> Electronic Gate	_____
<input type="checkbox"/> BBQ/Picnic Area	<input type="checkbox"/> Jogging Trail	<input type="checkbox"/> Grounds Maint.	<input type="checkbox"/> Guarded Gate	_____
<input type="checkbox"/> Playground	<input type="checkbox"/> Park	<input type="checkbox"/> Street Maint.	<input type="checkbox"/> Guard/Patrol	_____
<input type="checkbox"/> Tennis Court	<input type="checkbox"/> Exercise Rm.	<input type="checkbox"/> Ext. Home Maint.	<input type="checkbox"/> Security	_____

Information is deemed reliable but not guaranteed. Buyer should independently verify before relying there on.

August 2018