

The Cliffs at South Shore

REQUEST FOR REFUND **OF** **ACC DEPOSIT BY PROPERTY OWNER**

Please complete this request for refund form and forward it to the Association's Property Management Company, either by mail, fax or email:

Commonvest Community Association Management
2251 N Loop 336 W, Ste. C
Conroe, TX 77304
Phone: 936-521-6900
Fax: 936-521-6901
brooke@commonvestmgmt.com

Information to Be Supplied by Property Owner

Lot Description: Section _____ Block _____ Lot _____

Name of Property Owner: _____

Contact Information:

_____ Address

_____ City

_____ Zip

_____ Telephone and Email

1. Has all construction activity on the residence been completed? YES or NO
2. Has ALL construction trash and debris been removed from the property? YES or NO
3. Has Owner submitted copy of Certificate of Occupancy from the City of Conroe? YES or NO

Request Submitted by: _____ on _____, _____
Property Owner Date

Request Approved by: _____ on _____, _____
Architectural Control Committee Date

Refund of the Building Deposit will be mailed within thirty (30) days from the date this request is approved by the Architectural Control Committee.

Amount of Original Deposit \$ _____

Amount of Approved Refund \$ _____

Check # _____ Date: _____