


Timeshare Estoppel Request

Please return completed form to the owner shown below:

OWNER'S NAME:		 OWNER'S SIGNATURE:	
OWNER'S ADDRESS:			
OWNER'S PHONE:	OWNER'S FAX:	OWNER'S EMAIL:	
RESORT NAME:		OWNER'S ACCOUNT #:	
WEEK OR SEASON:		POINT ALLOTMENT IF APPLICABLE:	
UNIT #:	(UNIT: FIXED OR FLOAT)	ANNIVERSARY DATE:	IS THIS AN RCI / INTERVAL POINTS ACCOUNT?

TIMESHARE OWNER: Do Not Complete Any Areas Below This Point:

1. TIMESHARE USAGE: ANNUAL / EVEN / ODD / OTHER (please explain if other)		
2. NUMBER OF BEDROOMS:	3. NUMBER OF BATHS:	4. SLEEPS:
5. LOCKOUT UNIT: YES OR NO	5A. LOCKOUT SPLITS INTO:	5B. VIEW:
6. FLOATING USAGE: YES OR NO	7. HAS THE CURRENT OR FUTURE USAGE BEEN RESERVED/BANKED/ASSIGNED OR IS OTHERWISE UNAVAILABLE FOR A BUYER: YES OR NO	
8. IF FLOATING, WHAT ARE THE AVAILABLE USAGE PERIODS: (such as weeks 1-10 & 45-50, etc)		9. CHECK IN DAY:
10. ANY SPECIFIC WEEKS/HOLIDAYS RESTRICTED FROM RESERVATION:		

11. IS THERE AN EXISTING LOAN : YES OR NO (IF YES, PLEASE ATTACH PAYOFF DEMAND)	
13. ARE TAXES INCLUDED IN THE MAINTENANCE FEE BILL: YES OR NO	12. LAST MAINTENANCE FEE AMOUNT AND DUE DATE:
13. ARE THERE ANY CURRENT SPECIAL ASSESSMENTS: YES OR NO	18. ANY OTHER FEES DUE BEFORE TRANSFER:

19. OWNERSHIP TYPE: DEEDED OR LEASEHOLD	20. LEASEHOLD EXPIRATION?
21. RESORT TRANSFER FEE: \$	22. PAYABLE TO:

I THE UNDERSIGNED AFFIRM, AS AN EMPLOYEE OF THE DEVELOPER AND/OR RESORT, THAT THE ABOVE INFORMATION IS CORRECT PER THE DATE BELOW.
RIGHT OF FIRST REFUSAL IS REQUIRED: Yes or No

Completed By: _____

Print Name

Department/Title

Date