Estoppel Certificate Request

1. All estoppel certificate requests must be in writing by fax, email or mail. Typical turnaround is 7-14 business days from the date ACR receives the written request.

2. There is a $195.00 fee for the preparation of the estoppel certificate. The fee must be paid in advance. We accept all major credit cards. Requests requiring a turn around time of 48 hours or less are $395.00.

3. Estoppel certificates are only valid for 30 days. If payment is not received within 30 days from the date on the certificate, you must request a new estoppel.

4. Pursuant to the Fair Debt Collection Practices Act, ACR is not permitted to provide an estoppel certificate to anyone other than the Owner of the Unit <u>unless</u> the Owner has executed a third-party authorization form that specifically names those parties that are authorized to receive such information.

Association: _____

Unit Owner(s): _____

Property Address: _____

Unit No.: _____ City: _____ St: _____ Zip: _____

Date of Request:_____

Reason for Request: ❑ Sale ❑ Short Sale ❑ Purchased at Foreclosure ❑ Refinance

❑Other: _____

Date Needed: _____ Est. Date of Closing: _____

Closing Agent: _____ Phone: _____

Realtor: _____ Phone: _____

Where would you like the certificate sent? _____

Requested by: _____

Phone: _____ Email: _____ Fax: _____

Association Capital Resources
Attn: Estoppel Requests
4209 Baymeadows Road, Ste. 1
Jacksonville, Florida 32217

(888) 925-0688 Phone
(904) 301-0102 Fax
payoff@associationcapital.com
www.associationcapital-collections.com

Third-Party Authorization Form

Association: _____

Unit Owner(s): _____

Property Address: _____

Unit No.: _____ City: _____ St: _____ Zip: _____

Phone: _____ Email: _____

I/We hereby authorize the person(s) named below to request and receive balance and payoff information regarding my account for assessments on the above-referenced property. I acknowledge and agree that, in accordance with Section 718.116(8), Florida Statutes (2011), I may be responsible for any fees assessed as a result of an estoppel certificate request in the event that the closing does not occur. This authorization does not expire until revoked by me.

Authorized Parties: Name: _____

                         Relationship to Owner: _____

                         Phone No: _____

                         Name: _____

                         Relationship to Owner: _____

                         Phone No: _____

_____   _____
Owner Signature   Owner Signature

_____   _____
Print Name   Print Name

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