



## OREGON BUYER'S PACKET REQUEST FORM

Please complete this form to select your choice of delivery method.  
Fees for requested documents are non-refundable.

### DISCLOSURE DEPARTMENT

**PHONE:** (503) 227-2867  
**FAX:** (503) 227-2932  
**E-MAIL:** condorequest@kappesmiller.com  
**MAIL:** PO Box 3258 Portland, OR 97208  
**OFFICE:** 50 SW Pine St Portland, OR 97204

Our documentation packet will provide you with the pertinent Association records typically requested by buyers and their agents. The applicability and availability of documents varies from Association to Association. Kappes Miller can only provide you with the documents in its possession. While every effort is made to obtain all pertinent documents, completeness is not guaranteed. A buyer's packet includes the following documents if applicable/available.

- Declaration and Bylaws
- Articles of Incorporation
- House Rules and/or Board Resolutions
- Current Budget
- Current Financial Statement
- Prior Fiscal Year End Financial Statement
- Reserve Study
- Building condition assessments or other engineering studies
- Master insurance policy declaration or coverage summary
- Board and Association Meeting Minutes (last 12 months)

The default method of delivery of documents is via e-mail. A printed packet can be obtained for an additional charge. Packets will be sent or available for pickup within 5 business days of receipt of payment. Expedited service is available upon request. To receive a buyer's packet, we require that you complete Section A, Section B, and Section C below.

# SECTION A

Name of Individual Requesting Information	Email Address (required for email delivery)
Name of Condo or Association for which documentation is being requested	Daytime Phone Number
Street Address of unit/home being considered for purchase	
City, State, Zip of unit/home being considered for purchase	
Mailing Address (only required if you wish to have the documents delivered via US mail)	
Send to	
Street Address	
City, State, Zip	

**SECTION B**

**PLEASE SELECT YOUR DESIRED DELIVERY METHOD (choose one):**

- Buyer's Packet with e-mail delivery \$ 150.00
- Buyer's Packet printed and held in our office for pickup \$ 175.00
- Buyer's Packet printed and mailed via US mail \$ 190.00

**COST OF SELECTED DOCUMENTS AND SERVICES:** \_\_\_\_\_

**CHOOSE PREPARATION TIME:**

- Standard preparation (available/mailed within 5 business days of receipt)
- Expedited preparation (available/mailed within 16 business hours of receipt) add \$ 100.00

**TOTAL COST OF SELECTED DOCUMENTS AND SERVICES:** \_\_\_\_\_

**SECTION C**

**PLEASE READ CAREFULLY BEFORE SIGNING. THIS IS A LEGALLY BINDING CONTRACT.**

THE UNDERSIGNED HAS READ AND FULLY UNDERSTANDS THE FOREGOING TERMS AND CONDITIONS OF OBTAINING THE REQUESTED DOCUMENTATION AND AGREES TO THE SAME. THE UNDERSIGNED FURTHER REPRESENTS THAT IF HE/SHE IS REQUESTING THIS DOCUMENTATION ON BEHALF OF ANOTHER PARTY, HE/SHE HAS THE FULL AUTHORITY TO BIND SUCH PARTY. FURTHER, THE UNDERSIGNED UNDERSTANDS AND AGREES THAT IN THE EVENT THAT THE UNDERSIGNED FAILS TO MAKE ANY PAYMENTS WHEN DUE UNDER THIS CONTRACT, THE UNDERSIGNED SHALL PAY ALL COSTS AND EXPENSES, INCLUDING ATTORNEY/LEGAL FEES, INCURRED IN COLLECTING ANY PAYMENT DUE UNDER THIS CONTRACT.

Name	
Cardholder/Payee Signature	Date

**PAYMENT OPTION 1 PRE-PAYMENT BY CHECK** (Disclosure work will not commence until payment is received.)

**PAYMENT OPTION 2 BY CREDIT CARD**      
 We accept VISA or MasterCard. Please complete and mail or fax for processing.

Card Holder's Name	
Billing Address	
City/State/Zip	
Card Number <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Expiration Date <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/>
3 Digit Card Verification Number (CVV2 Code) <input type="text"/> <input type="text"/> <input type="text"/>	Payment Amount _____
Signature	Date

Charge backs will be considered delinquent and subject to collection provisions outlined above