

RIVERWOODS PLANTATION RV RESORT CONDOMINIUM ASSOCIATION, INC.
4600 Robert E. Lee Blvd.
Esterro, Florida 33928

E-mail:
assistantmanager@riverwoods.com
Fax: 239-992-6743

ESTOPPEL CERTIFICATE

1. Date completed: _____, 20____
2. Name(s) of Seller:

3. Address: _____

4. Is Account in collection with Attorney? Yes or No
Attorney Name: **Becker & Poliakoff, P.A.**
Attorney Contact Information: **Joseph E. Adams; jadams@bplegal.com**
Payoff information may be requested at: **FTMNAP.payoffs@bplegal.com**
5. Fee for the preparation and delivery of this Estoppel Certificate: \$250.00 if account not delinquent; additional \$150.00 for delinquent accounts; \$100.00 for expedited requests (the Association does not undertake to agree to expedited requests). Please note: The Estoppel Certificate request will not be processed until the required processing fee has been paid to the Association. Make check payable to “Riverwoods Plantation RV Resort Condominium Association, Inc.” The fee applicable to this Estoppel Certificate is \$_____. Please note if an account is in collections, legal fees for Payoff Letters are additional.
6. Name of the Title Co.: _____
7. The regular periodic assessment levied against the Unit is:
\$_____ per Quarter
8. The regular periodic assessment is paid through: _____, 20__
9. The next installment of the regular periodic assessment is due _____, 20__
in the amount of \$_____
10. An itemized list of all assessments, is attached
11. Is there a Capital Contribution Fee? Yes or No
12. Is there a Resale Fee? Yes or No
13. Is there a Transfer Fee? Yes or No Amount: \$150.00
14. Is there any open violation on this property? Yes or No
15. Is approval required? Yes or No

16. Is there a right of first refusal provided to the members or the Association?
 Yes or No
 If yes, have the members or the Association exercised that right of first refusal?
 Yes No Pending
17. Is there more than one Association to which the Owner of this property is a member?
 Yes or No
18. Names, addresses and phone numbers for all insurance maintained by the Association:

 Assured Partners _____

 3501 Del Prado Blvd., S., Suite 200 _____

 Cape Coral, FL 33904 _____

(NOTE: The above information is the contact information for the Association’s insurance agent. Copies of insurance policies are on file with the Association and are available for inspection and copying as provided by law.)

THE ABOVE INFORMATION IS TRUE AND CORRECT. EXCEPT AS SPECIFICALLY PROVIDED BY LAW TO THE CONTRARY, THE ASSOCIATION DOES NOT WAIVE OR INTEND TO COMPROMISE ANY LEGAL RIGHTS IT MAY HAVE BY THE COMPLETION OF THIS CERTIFICATE. THE RESPONSES HEREIN ARE MADE IN GOOD FAITH AND TO THE BEST OF MY ABILITY AS TO THEIR ACCURACY.
 RIVERWOODS PLANTATION RV RESORT CONDOMINIUM ASSOCIATION, INC.

By: _____ Date: _____

Print Name: _____ Title: _____

Phone: _____

If this Estoppel Certificate is hand delivered or sent by electronic means, it is effective for thirty (30) days from the date hereof, as set forth immediately above. If this Estoppel Certificate is sent by regular mail, it is effective for thirty-five (35) days from the date hereof, as set forth immediately above.

Please send copy of Warranty Deed upon closing.