## LAKE ACRES ASSOCIATION, INC. P.O. Box 1075 Spotsylvania, VA 22553

## REQUEST FOR LAKE ACRES ASSOCIATION DISCLOSURE PACKET

DATE:	
LOTS:	SECTION:
LOT OWNER(S)	
In order to facilitate the sale of the above-mentioned lot(s) and pursuant to the provisions of Section 55-512, Property Owner's Association Act of the Code of Virginia, I hereby request that you provide the information to me which is required by the Code of Virginia, within fourteen (14) days of your receipt of this request. The required one hundred dollar (\$100.00) fee, established by Lake Acres Association, Inc., may be enclosed herewit or paid at settlemen	
	t, and who is authorized to act for me in this matter. I of the above named agent is required as a receipt to Lake Acres
By:(Owner/Agent Signature)	By:(Owner's Signature)
(Owner/Agent Signature)	(Owner's Signature)
	ssociation, Inc. at on (date)
by(Authorized Officer or Agent)	
Receipt of the required one hundred dollars (\$100.00	)) fee is due prior to or at settlement
(Signature of receiving officer/registered agent)	·