

**CAPITOL PROPERTY MANAGEMENT  
3914 CENTREVILLE ROAD, SUITE 300  
CHANTILLY, VA 20151  
Phone: 703.707.6404 FAX: 703.707.6401**

**RESALE DISCLOSURE DOCUMENTS REQUEST FORM**

Today's Date: \_\_\_\_\_

Association name: \_\_\_\_\_

Property Address: \_\_\_\_\_

Legal owner name(s) \_\_\_\_\_

Phone number: \_\_\_\_\_

Method of delivery: \_\_\_\_\_ 1<sup>st</sup> Class Mail  
\_\_\_\_\_ Federal Express  
\_\_\_\_\_ Express Mail  
\_\_\_\_\_ Electronic E-mail to: \_\_\_\_\_  
\_\_\_\_\_ Pick up at Capitol Property Management  
\_\_\_\_\_ Other: specify \_\_\_\_\_

Please check the services required, which are in addition to the required exterior inspection:

- |                          |                                      |                      |
|--------------------------|--------------------------------------|----------------------|
| <input type="checkbox"/> | Exterior inspection                  | \$100.00             |
| <input type="checkbox"/> | Preparation and delivery, paper copy | \$150.00             |
| <input type="checkbox"/> | Preparation and delivery, electronic | \$125.00             |
| <input type="checkbox"/> | Expedited processing/5 day           | \$ 50.00             |
| <input type="checkbox"/> | Additional hard copy of package      | \$ 25.00 per package |
| <input type="checkbox"/> | Third party commercial delivery      | At cost              |
| <input type="checkbox"/> | Disclosure package update            | \$ 50.00             |
| <input type="checkbox"/> | Financial update                     | \$ 50.00             |
| <input type="checkbox"/> | Additional exterior inspection       | \$ 50.00             |

Method of Payment:

- Cash/check with order  
 Cash/check at time of pick up from CPM offices  
 At time of settlement

Settlement Company Name: \_\_\_\_\_

Settlement Date: \_\_\_\_\_

Package received by: \_\_\_\_\_  
Printed name Signature

Date received: \_\_\_\_\_

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For office use only

Date received in office \_\_\_\_\_ TOPS entry date: \_\_\_\_\_

Date to CM: \_\_\_\_\_ Accounting notified: \_\_\_\_\_

Date complete: \_\_\_\_\_

Date issued \_\_\_\_\_

Delivery tracking # \_\_\_\_\_