

Bradford Point Property Owners Association, Inc.

REQUEST FOR MINOR ASSOCIATION SERVICES

Owners Name _____

_____ Original (file)

4 Digit Unit # _____

_____ To Owner

Date Prepared _____

Date Services are Requested _____

Description of What Services Are Requested :

Signed _____

Below For Office Use Only

.....
Date received by Property Manager _____

Date Services performed/completed _____

Signed _____, Property Manager

Distribution: Send your Copy to the Office. A Copy will be given to owner when the requested services are completed, The original request form goes in Owner Unit file.

The description of the types of services requested on this form, this form and the timetable guidelines are on the website.