

## LAKE FOREST HIGHLANDS LOT OWNERS ASSOICATION

## **REQUEST FOR DUES VERIFICATION**

Current Owner Information					
Last Name				Phone No.	
First Name (s)					
Lot No.		Address			
			Buyer Information	n	
Last Name				Phone No.	
First Name (s)					
TITLE COMPANY INFORMATION					
Closers Name					
Company Name					
Company Address					
Phone No.				Fax No.	
Closing Date			Realtor and Company		
Date Requested					

Please request dues verification a minimum of five (5) five days prior to closing.

Please notify Association of new owner name etc. You may use the New Owner Notification Form.

Please return this request to: Lake Forest Highlands Lot Owners Association PO Box 856 Saline, MI 48176-0856