



## REQUEST FOR RESALE CERTIFICATE

### Property Information

Name of Association: \_\_\_\_\_

Unit Address: \_\_\_\_\_

Current Owner: \_\_\_\_\_

### Requesting Party Information

Name \_\_\_\_\_ Title: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

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

OWNER (or Relationship to owner: \_\_\_\_\_

### Delivery Information (Check one)

\_\_\_\_ Email: \_\_\_\_\_

\_\_\_\_ Pick up at 33rd Company

Additional charge for postage & handling (\$5.00)

\_\_\_\_ First Class US Mail to: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**\$195.00 FEE MUST ACCOMPANY THIS REQUEST IN ORDER FOR 33RD COMPANY TO PROCESS**

Credit Card (Circle one) <input type="checkbox"/> Mastercard <input type="checkbox"/> VISA <input type="checkbox"/> Discover
Card Number: _____ Exp. Date _____ CCV _____
Name: _____ please print
Billing Address: _____
Signature: _____ Date _____

\*Please allow approximately 5 business days for processing. An expedite fee of \$50 can be added for 1 business day service.