

**Key Community Management
Payment Plan Agreement**

Date _____ **Community name** _____

Phone # _____ **Email** _____

Owner Name _____

Property Address _____

I received the late notice from my homeowner association less than 15 days ago giving me a period of time to pay prior to being sent to the attorney for a lien. **I understand that if this form is not completely filled out with the correct information, my request will automatically be denied.**

The notice was dated _____ **and on that date I owed \$** _____ **for my property.**

I am unable to pay the balance in full at this time and therefore would like to make payment as allowed in this plan. I understand that according to North Carolina law, the Association is not obligated to offer or accept any payment agreement however in efforts to accommodate me they will consider this proposal. I am making the commitment to this plan by submitting my first payment with this proposal and will continue making the scheduled payments shown below unless advised by the association otherwise. I understand that if the association does not approve my plan regardless of reason, my first payment enclosed will still be applied to my balance due.

The **only arrangement** available requires payment over a maximum of **three (3) equal payments equating to 1/3 of the debt each**. Therefore, I have divided the debt into 3 payments below and it shall be paid in full as follows:

1. First payment \$ _____ due with this application within 15 days of the date of this Final Notice
2. Second payment \$ _____ due within 45 days from the date of this notice
3. FINAL payment \$ _____ due within 65 days from the date of this notice

Payments shall be made in the form of Certified Funds or Money Order payable to the community association and **mailed to Key Community Management 1201 Stallings Road, Matthews, NC 28104**. **We do not accept walk-ins with payment unless you have an appointment in advance.**

I understand that if I default on this payment plan, the previous collection activity (which will be temporarily suspended upon receipt of this form) will automatically resume without further notice, and I will incur legal fees. I also understand that if there are any new assessments or late fees incurred that those fees will need to be paid in addition to the amounts in this plan, as they become due, and on time. Any breach of payment for new amount due shall be considered a default.

Signature of Owner

Date

Print name

To Be Completed by Key Community Management for Association

Date Request Received: _____

Approved: _____ Denied: _____
