HEATH CROSSING HOMEOWNERS' ASSOCIATION

PAYMENT PLAN PROPOSAL

Please complete the information below and return to Legacy Southwest Property Management at <u>Accounting@LegacySouthwestPM.com</u> for Board approval. Once approved, the payment plan must be followed to avoid further collection measures. All assessments occurring during the payment plan must be paid on time in addition to the below agreement.

Name		Dat	Date	
Property Address				
Mailing Address				
Phone	Email Address			
TOTAL AMOUNT DU	J E:			
Payment Due Date	Amount Due	Payment Due Date	Amount Due	
•				
I hereby agree to make	e all navments on time as	specified above. I understand f	failure to nay timely will result	
in further collection me		ay have been previously waived		
Signature		Date		
Comments or Addition	nal Information/Request_			
	-			