

ENUMERATE:::

Making community management easier.

3363 W. Commercial Blvd, Suite 105 Ft. Lauderdale, FL 33309
Office (954) 284-3080 Fax (954) 284-3081 Email: estoppels@goenumerate.com
Accounting ~ Condominium Accounting ~ Financial Management ~ Consulting

ESTOPPEL CERTIFICATE REQUEST INSTRUCTIONS

All requests for estoppel certificates must be made to:

Enumerate Financial Services
3363 W. Commercial Blvd, Suite 105
Ft. Lauderdale, FL. 33309

TEL: 954-284-3080 / FAX: 954-284-3081 estoppels@goenumerate.com

All estoppel requests must contain the following information:

1. Association Name & Unit Number
2. Requesting Company Name, Contact person, telephone number & Email address

All estoppel requests must include payment as follows [as per change Florida Statutes effective July 1, 2017]:

1. The standard estoppel fee shall be the amount of \$299.00 for return service within 10 business days. [if payment by credit card please add \$10 for cc processing fee]
2. If the estoppel is requested to be delivered in a rush (i.e. within 3 business days after the request and payment are received), an additional fee of \$100 will be applied.
3. If the unit in question is in collections, the estoppel fee due to Enumerate is reduced to \$199.00, as the requesting party will need to submit a separate request to get the payoff amount directly from the Association's attorney/collections agent, which will incur an additional fee payable directly to them.

Please note the following:

1. PAYMENT WITH CREDIT CARD: Visa, Mastercard or Discover are accepted – add \$10.00 for credit card processing fee and return completed credit card authorization form.

a. Credit card requests should be email to estoppels@goenumerate.com

Your request is considered submitted and will be completed only after both the request AND payment are received.

2. We are longer accept Check payments.

3. * IF APPLICABLE PLEASE SUBMIT THE AFFIDAVIT OF SUFFICIENT FUNDS FORM DIRECTY TO THE ASSOCIATION *****

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To: _____ **From:** _____
Fax/Email: estoppels@goenumerate.com **Fax/Email:** _____
Phone: 954-284-3080 **Phone:** _____
Re: Authorization to charge credit/debit card **CC:** Estoppel or
COA/HOA Questionnaire

Urgent For Review Please Comment Please Reply Recycle

This represents authorization to charge my credit/debit card account in the amount of \$ _____ 00 + \$10.00 (service fee) for the purpose of providing an estoppel letter or completion of a COA/HOA questionnaire for the property located at:

For confirmation purposes only:

Credit Card #: _____ - _____ - _____ - _____

Please Circle One (**AMEX not accepted**): MC VISA DISCOVER

Security digits on card are: _____

Expiration date: _____

****Name as it appears on credit card and billing address (please print):**

_____ **ZIP** _____

Cardholder/Authorized Representative Signature _____

Date _____

Estoppel Letter/COA/HOA Questionnaire Services Will Not Be Provided Until This Authorization Is Received by Our Office. We Cannot Process Credit Card Payments Without the Correct Mailing Address. All Information Must Be Legible. Credit Card Service Fees Are Non-Refundable.