



**REQUEST FOR PROPOSAL - MANAGEMENT SERVICES**

NAME OF ASSOCIATION: \_\_\_\_\_

ADDRESS OF ASSOCIATION: \_\_\_\_\_

IS YOUR ASSOCIATION  Homeowners Association  Condominium

AGE OF ASSOCIATION \_\_\_\_\_

NUMBER OF UNITS/HOMES \_\_\_\_\_

AMENITIES  Pool  Clubhouse  Playground  
 Tennis Court  Security System  Walking/Bike Trails  
 Elevators  Gated  Boat Slips/Harbor  
 Boat/RV Lot  BMP/Fountains

ANY ADDITIONAL INFORMATION THAT MAY IMPACT THIS PROPOSAL  
\_\_\_\_\_  
\_\_\_\_\_

NUMBER OF MEETINGS MANAGEMENT TO ATTEND PER YEAR \_\_\_\_\_  
(meetings include Annual Membership Meeting, Board Meetings, Committee Meetings, etc)

PROPOSAL  Mailed  Emailed  Faxed  Hand Delivered

NUMBER OF COPIES \_\_\_\_\_

DATE PROPOSAL PACKAGE REQUESTED BY: \_\_\_\_\_

NAME OF CONTACT PERSON \_\_\_\_\_

BOARD MEMBER POSITION \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE NUMBER \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_