

**The Lakes Community Association
Payment Plan Request Form**

Name: _____

Address: _____

Phone: _____

As of this date _____, I currently owe the Lakes Community Association \$ _____ and would like to request a payment plan to the Board of Directors to review at the next scheduled Executive Session Board of Directors Meeting.

I understand that if the Board of Directors approves a payment plan that I will be required to sign and return the payment plan agreement form along with any down payment in order for the payment plan to take effect. Failure to sign payment plan, or if I default on payments, will result in further legal action or collection action to be taken on my account. Additionally, I understand that my privileges to the common area facilities may be suspended until fifty (50 %) percent of by back owed assessments are paid.

My request is to pay off the total amount owed in _____ months (should not be extended more than one (1) year). I will pay a down payment of \$ _____ or _____ % of the total amount owed (Board recommends 50%). Additionally, I will pay \$ _____ a month along with the current monthly assessment until all my back owed debt is paid in full.

My reason for requesting a payment plan is as follows (please describe in the space given):

*This form must be returned to Management prior to the Executive Session Board Meeting.

* I understand that not all requests will be approved as presented and the Board of Directors may counter my offer.

Signature: _____ Date: _____

The Lakes Community Association
30416 Laguna Vista
Menifee, CA 92584