Request for payment of commonhold assessment

FORM 2 To be completed by the commonhold association and sent to the unit-holder

This is a request for payment. Interest will be payable on any late payment. Please refer to the commonhold community statement for further details and, if necessary, get independent advice.

Unit number

number

commonhold

Amount of the

Signed (on behalf of the commonhold association)

Name (please print)

to your unit

your unit

Name of commonhold Name of unit-holder Address of unit-holder Name and address of ADDRESS NAME commonhold association Registered company Assessment for the (in figures) Percentage allocated to (in figures) (in figures) assessment allocated (in words) Details of the amounts and dates of payments you are required to make (use additional sheet if necessary)

Date