February 22, 2016

The Summit at Shiloh Owners 100 and 200 Jefferson Avenue Constitution and Independence Avenues State College, PA 16801

RE: Move out Procedures

Dear Owners:

In February, the Board of Directors implemented a Move In/Move Out form and set up a Building Representative Committee to aid and assist all residents. I ask now that for all owners to adhere to the form and the moving rules. An owner (or for their tenant) moving will need to fill this form out and forward it to our Continental Management, whom in turn will forward it to the Board, then on to the Building Reps.

The rules for moving are very important in our community and anyone found in violation after March 1^{st} , will be fined \$150 for not adhering to the COA CC & R's on moving. This is for the safety and convenience of all residents and to minimize damage to our buildings and villas. Big moving trucks pulling up without notice hopefully, will be a thing of the past.

Thanks and take care,
Tommy Heinz
COA President

Summit at Shiloh

Move-In/Move-Out

Request Form

Please complete a separate request form before Move In and before Move Out Move-In/Out Request (8:00 AM - 9:00 PM) 7 days advance notice is requested Move In Date: Time of Day: Time of Day: Move Out Date: Received By: Date Approved: For security and safety, elevator and entrance doors should not be permanently stopped or left open during move in or out. Tenant(s) and Owner(s) will be held responsible for any damage to the elevator or entrance doors and common areas. Clean-up and refuse removal charges may be assessed after move in or out. Empty boxes should be collapsed and neatly stacked in the garage recycling area. Damage to Association Property will be assessed to the responsible party. Owners are responsible for damage done by tenants during move-in/out. Tenant Information (please list all adult occupants) Vehicle(s): (Make, Model, Color, State & Plate #) Name (Last, First, MI) (1)(1) Tenant: (2) (2) Tenant: (3)(3) Tenant: Villa/Unit Address: Owner: Villa/Unit Owner Information Address: Owner: Owner: Vehicle: Vehicle: Insurance Information Tenant(s): Insurance Company: (1) Policy Number: Insurance Company: (2) Policy Number Insurance Company: (3) Policy Number Owner: Policy Number: Insurance Company: Contact Information Name: **Primary Tenant** Phone Number: Email Address: Name: Phone Number: Owner **Email Address:** Move In/Out Form: Please Mail Form to: Summit at Shiloh COA, 400 Jefferson Avenue, State College, PA 16801 Forms may be dropped off in the Clubhouse Office

Effective 11/30/2015, Summit at Shiloh Condominium Owners Association