



## Shoreline Towers Condominium Association

### CHECKLIST FOR SALE OR LEASE of UNIT

- Notice of Intent signed by all parties (forms attached)
- Copy of Executed Sales Contract or Lease
- Move Fees- payable to the Association. Fees are non-refundable  
\$300 Buyers / tenant move in fee
- Completed LMS Document Order Form with Processing Fees (for sales related documents)
- Closing statements (settlement statement) are required to be submitted after closing.

**\*\*The Board has waived their right of first refusal until further notice, no prior approval is needed for sales and leases\*\*\***

**MOVE IN-OUT PROCEDURES- Moves are scheduled with the Management office. Moves are allowed Monday-Sunday – time are 9:00 am to 1:00 pm, or 1:00 pm to 5:00 pm. Any move exceeding the 4 hour limit will incur a cost of \$65 for an additional 4 hours.**

**Moving is NOT allowed on residential elevators. Because the freight elevator does not travel to the basement garage in the West Tower, shopping carts are allowed in the residential elevators in the West Tower ONLY when travelling between the basement garage to and from residential floors.**

**3-1-2013**

NOTICE OF INTENTION TO SELL OR LEASE CONDOMINIUM UNIT

Part I and II of this Notice are to be completed in duplicate and submitted to the board of Directors. One copy of each part will be received by a Director and returned to the Unit Owner.

PART I

TO: Board of Directors  
Shoreline Towers Condominium  
6301 N. Sheridan Road  
Chicago, IL 60660

Date: \_\_\_\_\_

FROM: \_\_\_\_\_  
Unit Owner(s) Please Print

UNIT No. \_\_\_\_\_

1. Notice of Intention to Sell or Lease Unit

In accordance with the regulations established by the Board of Directors under Paragraph 1, Article IX of the "Declaration of Condominium Ownership", I (We) hereby submit to the Board of Directors this Notice of Intention to sell (or lease) the above described Unit to the party or parties (and only those parties) named in Section 2 below, and upon the terms specified in that Section. The tender to and receipt by the Board of Parts I and II of this Notice shall constitute valid notice of my (our) intention to sell or lease the above unit.

I (We) understand that within thirty (30) days after receipt by the Board of Directors, Part I and II of this Notice, duly completed and signed, the Board of Directors will either exercise its first right and option to purchase (or lease) the above mentioned Unit, or will formally waive that first right and option.

I (We) further understand that if the sale or lease transaction described herein is not closed within ninety (90) days after the Board has formally waived its first right and option, the sale or lease of this unit Ownership shall again become subject to the Board's right of first refusal as provided in Article IX of the "Declaration of Condominium Ownership" for Shoreline Towers condominium.

2. Summary of Terms of Sale or Lease

Name or Purchaser (or Lessee) \_\_\_\_\_

Address \_\_\_\_\_

Sales Price \_\_\_\_\_ Or Monthly Rental \_\_\_\_\_

Date Possession is Promised \_\_\_\_\_ If Lease, give expiration date \_\_\_\_\_

**COPY OF SALES CONTRACT OR LEASE MUST BE ATTACHED**

I (We), the Unit Owners of Unit \_\_\_\_\_, affirm our understanding of an agreement with the provisions set forth in Part I, attached, and certify the correctness of the information given in Part II, attached.

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Signature)

MEMORADUM OF UNDERSTAND (To be signed by Purchasers or Lessees)

I (We), the intended Purchaser (s) of the Condominium Unit described above, declare that we have read the "Declaration of Condominium Ownership for Shoreline Towers Condominium", and any amendment or amendments thereto, and understand that we shall at all times hold our interests in the Condominium subject to the rights, easements, privileges and restrictions therein set forth or hereafter established by the Owners or Directors of Shoreline Towers Condominium as duly provided for in the aforesaid "Declaration of Condominium". In addition, I (We) hereby certify that this is an arms length transaction, and further that there has been no latent understanding regarding sales price, rebates or any similar arrangement which would by implication nullify this as a truly bona fide sale. I have received a copy of Shoreline Towers Condominium Association's Declaration and Rules and Regulations.

Date: \_\_\_\_\_  
\_\_\_\_\_  
(Signature) (s)

Seller(s) or Lessor(s)  
I (We), also hereby certify as to the above.

Date: \_\_\_\_\_  
\_\_\_\_\_  
(Signature) (s)

THIS IS TO CERTIFY THAT \_\_\_\_\_  
(Name of Unit Owner)

Has on \_\_\_\_\_ deposited with the undersigned Officer of the Shoreline Towers  
(Date)

Condominium, Part I and II of the Notice of Intention to Sell or Lease Condominium Unit, and in doing so, has given valid notice to the Board of Directors of his intention to sell or lease his Unit to the Purchasers or Lessees name in the Contract.

\_\_\_\_\_  
(For the Board of Directors)

NOTICE OF INTENTION TO SELL OR LEASE CONDOMINIUM UNIT

PART II

Personal information and references to be given by the intended purchasers or lessees of Unit \_\_\_\_\_ in the Shoreline Towers Condominium.

1. Name of Purchasers or lessees \_\_\_\_\_ Age \_\_\_\_\_  
\_\_\_\_\_ Age \_\_\_\_\_  
\_\_\_\_\_ Age \_\_\_\_\_  
Names of all other persons who will reside in Unit. \_\_\_\_\_ Age \_\_\_\_\_  
\_\_\_\_\_ Age \_\_\_\_\_  
\_\_\_\_\_ Age \_\_\_\_\_

2. Present address of Purchaser \_\_\_\_\_ (Number and Street)  
\_\_\_\_\_ (City) \_\_\_\_\_ (State) \_\_\_\_\_ (Zip)  
Telephone No. Home: \_\_\_\_\_ Office: \_\_\_\_\_  
How long at above address? \_\_\_\_\_ Owned? \_\_\_\_\_ Rented? \_\_\_\_\_  
If rented, give landlords name and address: \_\_\_\_\_

3. Previous address of purchaser \_\_\_\_\_ (Number and Street)  
\_\_\_\_\_ (City) \_\_\_\_\_ (State) \_\_\_\_\_ (Zip)  
How long at above address? \_\_\_\_\_ Owned? \_\_\_\_\_ Rented? \_\_\_\_\_  
If rented, give landlords name and address: \_\_\_\_\_

4. Present employer's name and address \_\_\_\_\_  
\_\_\_\_\_  
Present occupation and job title \_\_\_\_\_  
\_\_\_\_\_  
How long with above company? \_\_\_\_\_

Please list two (2) business references

Name 1. \_\_\_\_\_  
Title and Telephone 2. \_\_\_\_\_

5. Bank Financing this purchase \_\_\_\_\_

6. Bank reference \_\_\_\_\_

7. Personal references 1. \_\_\_\_\_  
(Not employer or Relatives) 2. \_\_\_\_\_  
Include Telephone numbers 3. \_\_\_\_\_

8. The Board does not require but will welcome information regarding schools attended; degrees held; membership in professional and service organizations; honors; etc.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date: \_\_\_\_\_ (Signature of Purchaser or Lessee)

\*\*\*\*\*

Received above notice (Part II of Notice or Intention to Sell)

this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_.

\_\_\_\_\_  
(For Board of Directors)

## **XI. Moving In / Out**

All move-in / move-out requirements and fees are the responsibility of the unit owner. Fees will be set by the Board on an annual basis. A deposit may be required.

All Moves shall be scheduled at least 5 business days in advance and acknowledged by Management in writing.

Use of the service elevator will be scheduled by Management once the moving date is acknowledged. Elevator use will not be granted for a move until all current and outstanding assessments pertaining to the Unit are paid in full.

Large furniture that does not fit in the elevator can only be carried on top of the elevator car. Separate arrangements can be made with Otis to provide this service at a fee determined by Otis.

Moves shall take place Monday through Saturday, 9:00am to 5:00pm.

Owners are responsible for any and all damages to common areas caused during a move.

Entrance doors shall not be left open and unattended.

All moves shall take place through the loading dock. It may be necessary to move your vehicle to prevent blocking parkers.

If dollies are used, they shall have rubber wheels to prevent any damage to floors.

There will be a pre-move and post-move inspection to verify that no damage was done in the move process. Any damage incurred will be assessed to the Unit Owner.

Owners are responsible for the activities of their tenants, and fines for unscheduled moves by tenants will be the responsibility of the Unit owner.



**LIEBERMAN MANAGEMENT SERVICES, INC.**  
 25 Northwest Point Blvd. #330  
 Elk Grove Village, IL 60007  
 Phone: 847-459-0000 Fax: 847-777-7099

Email completed forms to: service@LMSnet.com , ATTN: Closing Department

This request must be completed and returned with payment to LMS PRIOR to any information being processed. All requests must be made using this format. Verbal requests will NOT be processed. If the Seller is set up on Automatic Withdrawal (eDEBIT), this will be cancelled when the Paid Assessment Letter is issued, unless advised otherwise in writing by the Seller.

Today's Date:   /  /   Closing DATE (Assessment must be paid for month closing in):   /  /  

Requestor / Contact Person /Company Name: \_\_\_\_\_

Phone # \_\_\_\_\_ Fax # \_\_\_\_\_

Name of Property/Association: \_\_\_\_\_

Homeowner/Seller Name(s): \_\_\_\_\_

Property Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

DEEDED AMENITIES BEING SOLD:  Parking # \_\_\_\_\_  Storage # \_\_\_\_\_  Cabana # \_\_\_\_\_

Homeowner/Seller Phone number(s): \_\_\_\_\_

Seller's New Forwarding Address : \_\_\_\_\_

Buyer Name(s): \_\_\_\_\_ Will Buyer occupy Unit? \_\_\_\_\_

Buyer(s) Current Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Buyer(s) Phone Number: \_\_\_\_\_

**INDICATE FORMAT YOU WOULD LIKE TO RECEIVE THE INFORMATION:**

FAX: Fax Number and Name (Decls/Bylaws and rules can not be faxed) \_\_\_\_\_

FEDEX shipping account # to be charged, (give address) \_\_\_\_\_

E-MAIL/OTHER: (Indicate email address) \_\_\_\_\_

**PAYMENT MUST BE RECEIVED PRIOR TO PROCESSING REQUEST:**

**METHOD OF PAYMENT:** Credit Card payments are encouraged, Visa/MC/Discover/Amer.Exp only. Checks are made payable to Lieberman Management Services. We will NOT begin processing until we receive payment. We must have name and signature of the cardholder or request will not be processed.

VISA,  MasterCard,  Discover Card,  American Express

Card # \_\_\_\_\_

3-Digit Code (back of card) \_\_\_\_\_ Exp Date \_\_\_\_\_

Cardholder Name(must have, please print) \_\_\_\_\_

Signature of Cardholder (required) \_\_\_\_\_

If paying by check, it must be enclosed with form: Check # \_\_\_\_\_



LIEBERMAN MANAGEMENT SERVICES, INC.  
 25 Northwest Point Blvd. #330  
 Elk Grove Village, IL 60007  
 Phone: 847-459-0000 Fax: 847-777-7099

PROPERTY ADDRESS: \_\_\_\_\_

Email completed form to: service@LMSnet.com, ATTN: Closing Department

Normal processing occurs within 5 business days once the COMPLETED PACKET\* is received. PRIORITY rates provide documents within 3 business days. NEXT BUSINESS DAY will be billed at EXPRESS rate. Requests received after 2:00 p.m. will begin processing the next business day. If the association has the RIGHT OF FIRST REFUSAL (not applicable on FHA loan), the processing of the documents is dependent upon the Board of Directors, priority and express not available.

**PLEASE CHECK THE ITEMS, CIRCLE THE DESIRED FEE-STRUCTURE AND FILL IN THE TOTAL FEE AMOUNT AT BOTTOM.  
 \*\*ALSO NOTE THE FHA LOAN INFORMATION NEEDED ON PAID ASSESSMENT AND QUESTIONNAIRE:**

TYPE OF DOCUMENT	Normal (5 Day)	Priority (3 Day)	Express (Next Day)
Amortization Letter (if applicable)	\$25.00	\$35.00	\$50.00
Articles of Incorporation	\$35.00	n/a	n/a
Audits / Tax Returns ( per each year requested)	\$20.00	n/a	n/a
Budgets (per each year requested)	\$15.00	\$20.00	\$25.00
Declaration & Bylaws	\$25.00	\$35.00	\$50.00
Disclosure Letter/22.1 (Disclosure Statement)	\$100.00	\$125.00	\$150.00
Financials (per each month requested)	\$20.00	\$30.00	\$40.00
HO Maintenance Charts (if available)	\$10.00	\$15.00	\$20.00
Insurance Certificates- Contact LMS for Carrier Contact Information. *No Charge if LMS can generate Certificate. Other carriers may charge a separate fee.	No Charge*	No Charge*	No Charge*
Insurance Policy (Complete Policy, Current period only)	\$15.00	\$20.00	\$25.00
Maps/Site Plans (if available)	\$15.00	\$20.00	\$25.00
Minutes (per each month requested)	\$15.00	\$20.00	\$25.00
Newsletters- each (if available)	\$10.00	\$15.00	\$20.00
Occupancy Letter	\$10.00	\$15.00	\$20.00
Paid Assessment Letter- Foreclosure/Collections on Unit Includes Right of First refusal if applicable **Does buyer have FHA Loan? <input type="checkbox"/> YES <input type="checkbox"/> NO	\$300.00	\$325.00	\$375.00
Paid Assessment Letter-Standard (for sale of property) Includes Right of First refusal if applicable **Does buyer have FHA Loan? <input type="checkbox"/> YES <input type="checkbox"/> NO	\$150.00	\$175.00	\$225.00
Paid Assessment Letter - Refinance or Home Equity Loan	\$100.00	\$125.00	\$175.00
Questionnaire (Please send Lender Form with this request) **Is this an FHA Loan? <input type="checkbox"/> YES <input type="checkbox"/> NO	\$125.00	\$150.00	\$175.00
Reserve Studies	\$25.00	\$35.00	\$50.00
Rules and Regulations	\$10.00	\$15.00	\$20.00

[ ] OTHER (Be specific) \_\_\_\_\_

**TOTAL FEES:** \_\_\_\_\_

\*Completed packet includes any checklist for the property, lender questionnaire forms, and applicable fees due.  
 Rev. 01/2012 M:\Closing\Closing Order Form





## **FREQUENTLY ASKED QUESTIONS FOR SALES AND RE-FINANCING OF HOMES**

### **QUESTION: Who should be the "Point of Contact" between the seller and LMS?**

**ANSWER:** *All documents and requests should be coordinated with the seller's attorney.* This will eliminate duplicate requests being submitted and ensure that all requirements are met. Realtors, sellers, buyers, mortgage companies, etc. calling in for the same requests only delays the process. Your cooperation is appreciated.

### **QUESTION: What is the first step in the process?**

**ANSWER:** Attorneys, realtors and others can also request the form from the Resident Service Department. Simply call 847-459-0000 or 312-202-9300 and ask for this form. It will be sent to the caller (via regular mail, fax or email). Upon receipt, please review the form and complete the form out in its entirety. Unit owners registered on the LMS eSTAR website can retrieve the order form on the website, under My Reference Library.

### **QUESTION: What could delay the processing of the request?**

**ANSWER:** Missing or unclear information will delay the processing of your request. The information must be completed and returned with payment prior to any information being processed. Your documents will not begin processing, regardless of the date received, unless all requirements are met. We will not follow up on incomplete packets, and we ask that the seller's attorney be the point of contact for all related concerns. Please audit and ensure that all of the information has been completed. All requests must be made using this format. Information will not be processed through verbal requests.

### **QUESTION: How can payments be made?**

**ANSWER:** LMS accepts checks and credit card payments, Visa, MasterCard, Discover, and American Express. If you are sending back the 2 Page Order Form via Fax, these are only accepted if being paid by Credit Card. All other requests are to be mailed in to the LMS office at 25 Northwest Point Blvd, Elk Grove Village, IL 60007, once the entire packet has been accumulated. Please also note that fees associated with the request for documents must be paid separately from any Association related moving fees or deposits. Please refer to the Association's moving policy for those details.



**QUESTION: What information is needed to process the request?**

**ANSWER:** Resident Services can provide you with the following:

1. Seller and Buyer informational page- "2 Page Order Form"
2. Document Order and Payment form- "2 Page Order Form"
3. Closing Checklist for your specific Association
4. If applicable, the Right of First Refusal Packet (ROFR)

**QUESTION: How quickly will the request be processed?**

**ANSWER:** All requests are processed within specific timelines, depending on the level of service requested and pursuant to the Illinois Condominium Property Act (where applicable). Although state law allows thirty (30) days for the processing of this information, processing occurs as listed below, once the complete packet is received:

- "Normal" processing occurs within five (5) business days
- "Priority" processing occurs within three (3) business days, and are billed at a premium rate. (Excludes Associations with ROFR)
- "Express" processing occurs within one (1) business day (6:00 p.m. close of business) will be billed at a premium rate. For any requests received after 2:00p.m., the processing time will begin with the next business day. (Excludes Associations with ROFR)

**QUESTION: What if my Association has the "Right of First Refusal"?**

**ANSWER:** If the association has the "Right of First Refusal," and there is not FHA funding being provide to the Buyer, the processing of the documents is dependent upon the Board of Directors. "Priority" and "Express" options are not available. If the Buyer is using an FHA backed loan, other criteria such as pre move meetings or orientations still apply as per the individual property's governing documents.

**QUESTION: Why does LMS charge fees for the Paid Assessment Letter?**

**ANSWER:** The charges are for the liability the letters carry as well as the preparation of the information. In accordance with the Illinois Condo Law Act, the assigned fees are noted to be fair and reasonable.

**QUESTION: What if the Paid Assessment Letter needs to be revised?**

**ANSWER:** Any changes to the Paid Assessment Letter may result in new fees being charged. Please refer to the 2 Page Order Form. Any request for a new Paid Assessment letter for status for a subsequent month will require a new fee.