

# PA 3407 Resale Certificate (Condominium Act)

## I-295 INDUSTRIAL

**Current Owner: FRZ Commercial Real Estate**  
**Property Address: 1000 Delsea Drive Unit: B-4**  
**WESTVILLE , NJ 08093**

**Requestor Name: Carole Medica**  
**Requestor Phone: 856-904-5058**

**Date Prepared: 03-27-2019**

This Association Certificate is provided pursuant to provisions of Section 3407(b) of the Pennsylvania Uniform Condominium Act UCA. The Association, within ten (10) days after a request by a unit owner, shall furnish a certificate containing the information and copies of documents necessary to enable the unit owner to comply with Section 3407 (a) of the UCA.

All information in this Certificate is provided based upon and limited to the actual current knowledge of the Executive Board without investigation other than in consultation with the Managing Agent for the Association.

1. The effect on the proposed conveyance of any right of first refusal or other restraint on the free alienability of the selling unit other than any restraint created by the selling unit owner is as follows:

**The Association does not have the right of first refusal on the sale of all units.**

2. The selling unit is subject to a common expense assessment as follows:

**Payments are due on the 1st of each quarter in the amount of \$1,800.00. A late fee of 1.25% of the balance will be charged if not paid by the 10th of the month.**

**All payments should be mailed to 511 West Chester Pike, Havertown PA 19083.**

3. As of the date of this Certificate, the following unpaid common expenses or special assessments currently due and payable from the selling unit owner are:

**As of 3/27/2019 there is a \$0.00 balance on the account.**

4. Other than common expenses and special assessments, the following fees are payable by the unit owners to the Association:

**Buyer:**

**-Next quarterly payment due in advance.**

**-Capital Contribution (1/6 of annual common assessment)-\$1,200.00**

**-One Time Account Set Up Fee- \$75.00, made payable to CAMCO.**

**All checks should be mailed to 511 West Chester Pike, Havertown PA 19083.**

5. Capital expenditures proposed by the Association for the current and two next succeeding fiscal years are:

**Verify**

6. The amount of any reserves for capital expenditures and of any portions of those reserves designated by the association for any specified project are listed here:

**(+)\$595,279**

7. Attached is the most recently prepared balance sheet and income expense statement, if any and the current operating budget of the Association.

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8. Judgments against the Association and the status of any pending suits to which the Association is a party are:

**None known.**

9. The insurance policies provided for the benefit of the Association can be obtained from:

**Dash & Love, 610-667-2244**

10. The Association has knowledge that the following alteration or improvement to the selling unit, or to the limited common elements assigned to the selling unit, violates a provision of the declaration:

**Verify**

11. The Association has knowledge of the following violation of the applicable governmental requirements or knowledge of the existence of any hazardous conditions pursuant to section 3402(a)(26) or with respect to the unit, the limited common elements assigned thereto or any other portion of the condominium:

**None**

12. The remaining term of the leasehold estate affecting the condominium and the provisions governing any extension or renewal thereof are as follows:

**None**

13. The declaration provides for the following cumulative voting or class voting:

**None**

14. An agreement to terminate the condominium has been submitted to the unit owners for approval and remains outstanding as follows:

**None**

15. The condominium is a Master Association or is part of a Master Association or could become a Master Association or part of a Master Association as follows:

**None**

16. The following units, if any, may be owned in time-share estates and the maximum number of time-share estates that may be created in the condominium are:

**None**

17. The declarant retains the special declarant right to cause a merger or consolidation of the condominium and, if so, the information describing such right which was supplied by the declarant pursuant to section 3205(13) is:

**None**

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

As per the Pennsylvania Uniform Condominium Act the seller must provide this packet of information for the buyer when a resale of a unit within a planned community occurs.

**ACKNOWLEDGEMENT AND ACCEPTANCE**

I hereby acknowledge I have received and read the information contained in this Certificate of Resale.

**SELLER(S):**

Print \_\_\_\_\_

Sign \_\_\_\_\_ Date \_\_\_\_\_

Print \_\_\_\_\_

Sign \_\_\_\_\_ Date \_\_\_\_\_

**BUYER ACKNOWLEDGEMENT:** Buyer has received, read and hereby approves and accepts the Certificate of Resale, all related Governing Documents, By-Laws, & Rules & Regulations for subject property and agrees to abide by the same.

**BUYER(S):**

Print \_\_\_\_\_

Sign \_\_\_\_\_ Date \_\_\_\_\_

Print \_\_\_\_\_

Sign \_\_\_\_\_ Date \_\_\_\_\_

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**Contact Information**

The information above was obtained by the following representative of the project's Homeowners Association

**Name: Chris Maus**

**Phone: 610-446-9292 Ext: 213**

**Title: President**

**Date: 03-27-2019**

**Email: [resales@camcomgmt.com](mailto:resales@camcomgmt.com)**



Signature

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**Comments**

Please call prior to settlement for updated account balance, 610-446-9292.

## **Receipt for Resale Package**

Please remember to complete and return this form with closing documents and settlement checks to:

CAMCO Management  
Attn Resale Dept  
501 W. Office Center Drive, Suite 220  
Fort Washington, PA 19034

1. Seller's Name(s): \_\_\_\_\_

2. Unit Address: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

3. Seller's forwarding mailing address: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

I hereby verify I/we have given resale documents required by Pennsylvania law to the Buyer.

Seller's Name: \_\_\_\_\_ Date: \_\_\_\_\_ Seller's

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

1. Buyer's Name(s): \_\_\_\_\_

2. Buyer's future mailing address: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

3. Buyer's Phone Number(s): \_\_\_\_\_

4. Buyer's Email address: \_\_\_\_\_

I hereby verify I/we have received resale documents required by Pennsylvania law from the Seller.

Buyer's Name \_\_\_\_\_ Date: \_\_\_\_\_

Buyer's Name \_\_\_\_\_ Date: \_\_\_\_\_