

# NEW COLLECTION WORK REQUEST

Please complete the fields below and return to our office via fax to (770) 455-3555 or email to [collections@mooreandreeese.com](mailto:collections@mooreandreeese.com).



Attorneys at Law

## Association Information

Association Name \_\_\_\_\_

## Collection Contact

Name \_\_\_\_\_ Title \_\_\_\_\_

Email Address \_\_\_\_\_ Phone No. \_\_\_\_\_

## Legal Service Requested

Lien Filing Only Program \_\_\_\_\_

Pre-Litigation Collection Action \_\_\_\_\_

Full Collection \_\_\_\_\_

## Property/Owner Information

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

Name of Owner \_\_\_\_\_

Mailing Address (if different from property address) \_\_\_\_\_

Email Address \_\_\_\_\_ Phone No. \_\_\_\_\_

Employer Name \_\_\_\_\_

Employer Address \_\_\_\_\_

## Additional Information

Date First Delinquent \_\_\_\_\_ Delinquent Amount \_\_\_\_\_

Does the Association have any knowledge of the following?

- military service? \_\_\_\_\_ Yes \_\_\_\_\_ No
- any pending bankruptcy on homeowner? \_\_\_\_\_ Yes \_\_\_\_\_ No
- covenant violations? \_\_\_\_\_ Yes \_\_\_\_\_ No

Please provide a copy of the check used to pay prior assessment, if available.