



ADVANCED RESERVE SOLUTIONS, INC.

ASSOCIATION INFORMATION SHEET

If you would like **ARS** to provide a proposal for a Reserve Study, please fill out this information sheet and fax it back to us along with a map of the project if available.

We will promptly provide you with a written proposal.

Fax: 949.474.9820

Name of Association: _____ Date: _____

Physical Address: _____

Requestor's Name: _____

Management Company: _____

Street Address: _____

City, State & Zip Code: _____

Phone: _____ Fax: _____

DESCRIPTION OF DEVELOPMENT

Number of units: _____

Approximate age of development: _____

☐ Condominiums / Townhomes

☐ Single Family Homes/PUD

☐ Other: _____

TYPE OF RESERVE STUDY

☐ Complete with on-site inspection

☐ Update with on-site inspection

☐ Update without on-site inspection

OTHER INFORMATION

Is the association responsible for roofs?

☐ Yes ☐ No

Is the association responsible for painting?

☐ Yes ☐ No

Is there an existing reserve study available?

☐ Yes ☐ No If yes, who prepared it? _____

Describe any unusual factors that may affect the amount of time required to perform the reserve study:

AMENITIES AND FACILITIES (✓)

Pool		Large Fountains	
Spa		Lakes or Ponds	
Restroom Building		Elevators	
Clubhouse		Carports	
Enclosed Garages		Asphalt Streets or Parking Areas	
Tennis Courts		Electric Gates	
Extensive Wood or Wrought Iron		Central Hot Water (Boilers)	
Vehicles or Heavy Equipment		Other (Please Explain Below)	
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ADVANCED RESERVE SOLUTIONS, INC.

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