**Closing Request Form**

Typically closing requests have a turnaround time of 2-3 business days excluding weekends and holidays. If you have any questions regarding the status or process of a closing request please contact our office at 219-286-6071 or HOA@rmcmanaged.com

Please mail, e-mail or fax this document to our office:

RMC  
Attn: HOA Department   
175 W Lincolnway, Suite H  
Valparaiso, Indiana 46383   
Phone: 219-286-6071  
Fax: 219-286-6072   
Email: [hoa@rmcmanaged.com](mailto:hoa@rmcmanaged.com)

Please fill out this form in its entirety to request a closing letter.

This information is considered confidential.

Today’s date \_\_\_/\_\_\_/\_\_\_\_ Closing date \_\_\_\_/\_\_\_\_/\_\_\_\_\_

ASSOCIATION NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SELLER: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PURCHASER: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PROPERTY ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ CITY/STATE/ZIP \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Attach the form you need filled out with this document.

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