## AFI Professional

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## RESERVE STUDY QUESTIONNAIRE

For a reserve study estimate, please fill out this questionnaire and fax it to us and we will get you an estimate within one business day.

ASSOCIATI	ON INFORMATION	Date:	
Name of Asso	ociation:		
Physical Addr	ress of Association:		
City:	St	ate:	Zip Code:
Number of Ur	umber of Units?:APN or attach plot map:		
CONTACT I	NFORMATION		
Name: E-Mail:			
Company Nar	me:		
Address:			
City:		State:	Zip Code
Phone Numbe	er:	Fax:	
BUIDINGS			
	included? If yo	es continue here, if not s	kip to Common Grounds
Number of Bu	nildings N	umber of units per Build	ling
Is the Associa	tion responsible for any or	f the following?	
$\square$ Roofs	□Flat Roof	☐ Siding or Stucco	$\Box$ Paint
$\square$ Patios	□Patio Rails	$\Box$ Garages	$\Box$ Carports
$\square$ Decks	□ Deck Rails	□Roof Gutters	□Stairs
$\square$ Shed	☐Concrete Walks	□Exterior Lights	$\square HVAC$
$\Box$ Gate	☐ Interior Hallways	☐Fire Escapes	☐ Water System
□Signs	□Electric Panels	□Elevators	□Boiler