

# OAKWOOD VILLAGE HOMEOWNERS ASSOCIATION

## INFORMATION SHEET (12/17)

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This listing should help you with getting your feet on the ground at Oakwood Village HOA. Keep this information for quick reference.

**PROPERTY MANAGEMENT:** Z & R Property Management is the company responsible for the management of Oakwood Village HOA. If you are not sure about whom to call or how to handle a problem, contact Z & R and ask for Kerry. His email is kerry@zandrmgmt.com. ***Please visit the website: [www.OakwoodVillageHOA.com](http://www.OakwoodVillageHOA.com)***

**DUES:** The dues are \$140.00 monthly and are payable in advance on the first day of each month and becomes delinquent after the 10th, at which time a late charge of \$10.00 per month is assessed.

Make your check payable to **Oakwood Village HOA** and mail all payments to:

**Dept. L.B. Oakwood Village HOA  
P.O. Box 912752  
Denver, CO 80291**

The statement is only a helpful reminder of your dues. **Not receiving your statement or coupons will not exempt you from Association dues or late fee.** Please use your “**UNIT NO:**” as your account number in the online bill pay section of your bank’s website or in the note section on your handwritten check. Examples: AB1234C, AB1234, 1234C (Please include all Numbers and letters).

***Option 2: Online Credit Card Payment.*** You may go to [www.web.condomanager.com](http://www.web.condomanager.com) to make an online payment. Please contact our office for a username and password.

***Option 3: Automatic withdraw.*** If you would like to set up EFT (Electric Funds Transfer) through our office please **fill out page 4.** (Easiest – No Cost – Quickest - Worry Free Way to Pay!)

**MAILBOXES:** Mailboxes are home owner’s responsibility. If you need a key to your mailbox, please contact a locksmith.

**ARCHITECTURAL CONTROL COMMITTEE:** No Improvement shall be placed, erected, installed or permitted to occur or exist on any Lot, nor shall the exterior of any existing Improvement be painted or altered, nor shall any construction be commenced on any improvements, nor shall any Landscaping be installed or modified, unless and until the plans and specifications for such Improvements shall have been submitted to and approved in writing by the Architectural Control Committee. If you are interested in making an exterior modification to your home or landscaping, please contact Z&R in writing so that your request can be forwarded to the committee for review and a written response. The ACC, prior to commencement, must approve all exterior modifications in writing.

**CONTACT PROTOCOLS FOR Z & R:** As your Management Company, Z&R should be your first point of contact on every issue involving the Association from work order requests to

Covenant violations. Office hours are from 8:30 a.m. to 5:00 p.m. on Monday through Friday. If you are planning to visit us in person, we encourage you to call ahead to ensure someone is expecting you. Should you need to contact us about Association matters involving Covenant violations, complaints, suggestions, etc., we ask that you put your thoughts in writing and forward them to us so that we may, in turn, keep them recorded and ensure they reach your Board of Directors for the appropriate response and follow up. Mail, email and faxes are all acceptable.

**COVENANTS, RULES AND REGULATIONS:** As with any community such as yours, there are certain guidelines that govern the dos and don'ts. As your Management Company, one of our directives is to understand and enforce all of your standing Covenants from pets to parking. For this reason, we ask that you dust off your copy of the Covenants, Design Guidelines and Community Standards and any Resolutions and encourage you to review them.

**BOARD OF DIRECTORS:** Your Board of Directors consists of non-compensated owners who volunteer their time to serve the community. For this reason, we ask that you first try to work through Z&R to have your concerns addressed. If you feel that Z&R has not served you well or that you have to deal directly with the Board, you have several ways you can contact the Board Members: #1. Attend one of the Board Meetings. Please call our office for specific dates and times. #2. Write a letter, fax or email to Z&R. We will forward all correspondence we receive to the Board. #3. Call Z&R and request to have a Board Member call you back. We will then contact the highest ranking Officer available and request they contact you directly to listen to your concerns. By following these procedures, you allow your Board Members to govern effectively and remain neighbors who have lives apart from their volunteer work.

**INSURANCE:** American Family handles the Association's Insurance requirements. Specific questions should be directed to Jeff Champine at (303) 706-1766.

**NOISE COMPLAINTS:** If you are having trouble with noise from a neighbor, please contact them directly first. If this does not solve the problem, filing a noise complaint with the police department is the next best alternative. The Association can write letters and issue fines after a certain period, but this process is very slow and generally is not as effective as calling the police. 10:00 pm to 7:00 am is quiet time with few exceptions. Please be respectful of neighbors. If a resident has been contacted regarding a noise complaint, a second reminder may include a fine assessment.

**PETS:** 2 pets with a 30lb weight limit are allowed. When a pet is outside the unit, it must be on a physical leash at all times. The person in control of the animal must clean up after the pet immediately. Pets may not be left unattended or tied to an outdoor structure. Please do your part by complying with pet rules.

**TRASH PICKUP:** Springs Waste provides the trash service for the community. Please ensure your trash is placed curb side by 7:00am on Tuesday. The number for your trash company is (719) 634-7177.

# Oakwood Village HOA CONTACT POINT REQUEST FORM

Dear Homeowner:

Please take a few minutes to fill out this form. This information **will not** be published or given out and is strictly for Association use should you ever need to be contacted. Thank you.

Owner Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Unit Address if Different: \_\_\_\_\_

Home #: \_\_\_\_\_ Work #: \_\_\_\_\_ Cell #: \_\_\_\_\_

Email 1: \_\_\_\_\_

Email 2: \_\_\_\_\_

Do you wish for your email to be entered in the HOA website email alert system?

Yes  No

Tenant Information: (If Applicable): \_\_\_\_\_

\_\_\_\_\_  
Signature and Date: \_\_\_\_\_

Please mail or email to:

Oakwood Village HOA  
C/O Z & R Property Management  
6015 Lehman Drive, Suite 205  
Colorado Springs, CO 80918

[Bev@ZandRMgmt.com](mailto:Bev@ZandRMgmt.com)



6015 Lehman Drive, Suite 205 Colorado Springs, CO 80918  
Phone: (719) 594-0506 Fax: (719) 884-4496  
books@zandrmgmt.com

**EFT (Electronic Funds Transfer) Form**

Dear Homeowner:

Please complete and return to Z&R the agreement below to initiate direct payment of your Homeowners Association dues. **Please attach a voided check to this form to validate the ABA and Account number.** Dues changes will automatically be adjusted and you will be notified in writing of such an occurrence. Your signature will activate automatic withdrawal of dues from the account indicated in the amount of **\$140.00** on the 2<sup>nd</sup> day of each month effective the month *after* receipt of this form:

**AUTHORIZATION AGREEMENT FOR AUTOMATED PAYMENTS**

Company: **Oakwood Village HOA**

(To Be Completed By Owner)

I (we) hereby authorize **Oakwood Village HOA**, hereinafter called COMPANY, to initiate debit entries to my (our) Checking Savings account (select one) indicated below and the depository or bank named below, hereinafter called DEPOSITORY, to debit same to such account.

Bank Name: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Routing No: \_\_\_\_\_ Account No: \_\_\_\_\_

This authority is to remain in full force and effect until COMPANY and DEPOSITORY has received written notification from me (or either of us) of its termination in such time and in such manner as to afford COMPANY and DEPOSITORY a reasonable opportunity to act on it.

Name(s): \_\_\_\_\_

Phone #: \_\_\_\_\_

Signature(s): \_\_\_\_\_

Date: \_\_\_\_\_ For Unit: \_\_\_\_\_ Start Month: \_\_\_\_\_

Email address: \_\_\_\_\_