



Memorial Club Townhouses Association

**CERTIFICATE OF COMPLIANCE**

Date: \_\_\_\_\_ (Must be submitted 14 days prior to the scheduled sale.)

Estimated Closing Date: \_\_\_\_\_

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

Requestor Name: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Patio Gate Locked  YES  NO

Title Company Name \_\_\_\_\_ Phone \_\_\_\_\_

Email Address of Title Agent \_\_\_\_\_

Closing Date \_\_\_\_\_

Please make checks payable to MCTA: \$50.00 – Request complete in 5 days  
\$75.00 - Request complete in 3 days  
\$100.00 – Request complete in 24 business hours

**CERTIFICATE IS VALID FOR 30 DAYS – REINSPECTION FEE IS \$25.00**

**No inspection will be complete without prior payment.**

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**FOR OFFICE USE ONLY**

**Payment Received:** \_\_\_\_\_ **Payment Amount:** \_\_\_\_\_

**Certificate Completed Date:** \_\_\_\_\_