

**2024 Collings Lakes Civic Association**  
**Dam Assessment Payment Arrangement Form for Tier 1 Residents**

Although the Bylaws do not require the Board of Trustees to allow payment plans, the Board has again decided that it will work to help those members for whom the full payment of the dam assessment in January will be unduly burdensome.

**To qualify for this Payment Agreement with the Association, you must:**

1. Be a member of good standing with a current account as of December 31, 2023
2. Submit this form completed in its entirety to the association by January 31, 2024.
3. Submit Full Maintenance Payment (\$166.44) & First Installation (\$108.91), which is a total of \$275.35, by January 31, 2023.

Failure to submit this completed form in its entirety along with the requisite payments will be considered insufficient to enter into this Payment Arrangement and your account may be forwarded to legal counsel. Under the Bylaws and the Court Order applicable to collections, you will be responsible for all attorney fees and costs incurred by the Association pursuing the collection of your unpaid assessments. In addition, failure to make the payments by January 31st as required herein will result in referral of your account to legal counsel with no further notice to you. Any assessments that are not paid as required are subject to the imposition of interest on or after February 1, 2024.

**Payment Arrangement Schedule**

<b>Payment 1 Due On or Before 1/31/24</b>	<b>\$108.91 + Maintenance Fee of \$166.44 = Total of \$275.35</b>
Payment 2 Due On or Before 2/28/24	<b>\$108.88</b>
Payment 3 Due On or Before 3/31/24	<b>\$108.88</b>
Payment 4 Due On or Before 4/30/24	<b>\$108.88</b>
Payment 5 Due On or Before 5/31/24	<b>\$108.88</b>
Payment 6 Due On or Before 6/30/24	<b>\$108.88</b>
<b>Totals:</b>	<b>Maintenance: \$166.44 Dam: \$653.31 Total: \$819.75</b>

**Submission of this application & First Payment (check or money order)  
must be submitted by mail to P.O. Box 925 Voorhees, NJ 08043**

**Application For Payment Arrangement**

Name:	
Address:	
Phone Number:	
Email:	

By completing & submitting the form above and signing below you are acknowledging you understand that if payment is missed, per the above installment schedule, the entire balance will immediately become due and payable. Additionally your account will be sent to legal counsel without further notice if not paid within 30 days.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_