Commonwealth of Virginia
Department of Professional and Occupational Regulation
9960 Mayland Drive, Suite 400
Richmond, Virginia 23233-1485
(804) 367-8510
www.dpor.virginia.gov

Department of Professional and Occupational Regulation

Common Interest Community Board

COMMON INTEREST COMMUNITY ASSOCIATION REGISTRATION APPLICATION

A check or money order payable to the TREASURER OF VIRGINIA,
***or* a completed credit card insert must be mailed with your application package.**
APPLICATION FEES ARE NOT REFUNDABLE.

Number of Units/Lots			X	Fee
1	-	50	☐	$ 45
51	-	100	☐	$ 65
101	-	200	☐	$ 100
201	-	500	☐	$ 135
501	-	1000	☐	$ 145
1001	-	5000	☐	$ 165
5001+			☐	$ 180
Application Fee				
Recovery Fund				+ 25
TOTAL FEES				$ **25**

1. Has this association previously filed an application with the Virginia Common Interest Community Board?
   No ☐
   Yes ☐ If yes, enter the registration number. | 0 | 5 | 5 | 0 | | | | | | |

2. Full Name of Association _____

3. Name of Subdivision/Community (if different from #2) _____

4. Association's Federal Tax Identification Number (EIN) ☐☐ - ☐☐☐☐☐☐☐
   Federal Employer Identification Number (12-3456789)
   Number used when filing taxes or banking.

5. Name of Contact Person _____
   (to receive Board correspondence on behalf of the association)

6. Contact Person's Mailing Address _____
   City _____ State _____ Zip Code _____

7. Contact Numbers
   Primary Telephone _____ Alternate Telephone _____ Fax _____

8. Contact Person's Email Address _____

The name and mailing address of the Contact Person will appear on the certificate of filing issued by the Board.

OFFICE USE ONLY	DATE	FEE	TRANS CODE	ENTITY #	FILE #/LICENSE #	ISSUE DATE
			1020		0550	

GOVERNING BOARD MEMBER INFORMATION

9. Full Name of Governing Board Member _____

10. Governing Board Member's Mailing Address _____

_____ (City) _____ (State) _____ (Zip Code)

11. Contact Numbers _____ (Primary Telephone) _____ (Alternate Telephone) _____ (Fax)

12. Governing Board Member's Email Address _____

Contact information for the governing board member authorized by the association to receive correspondence related to notices of final adverse decision from the Office of the Common Interest Community Ombudsman.

Association Information

13. Type of Association

Property Owners' ☐ Condominium Unit Owners' ☐ Proprietary Lessees' (Cooperative) ☐

14. Is the Association incorporated? No ☐ Yes ☐

If yes, enter the State Corporation Commission No. _____

15. Declaration Recorded (MM-YY) _____ City/County where Declaration Recorded _____

16. Total Number of Units/Lots _____ Zip Code of Association _____

17. Is the Association under Declarant Control? Yes ☐ No ☐

If no, date association transferred to owners. _____

18. Website Address of Association (if available) _____

19. Indicate how the community association is managed.

☐ Self-managed (i.e., resident, volunteer, etc.)
☐ Managed by an employee of the association
☐ Under contract with a common interest community manager

If under contract, provide the following information:

Name of Management Company _____

Common Interest Community Manager License Number | 0 | 5 | 0 | 1 | | | | | | |

Website Address of Management Company (if available) _____

20. In accordance with § 54.1-2354.4(A) of the *Code of Virginia* and the Common Interest Community Ombudsman Regulations 18 VAC 48-70-30 and 18 VAC 48-70-40, do you certify on behalf of the association that an association complaint procedure has been or will be established and adopted by the governing board within 90 days of this filing? *Note: Any association that has been delinquent in registering and filing annual reports must have an association complaint procedure established and adopted by the governing board at the time of this filing.*

Yes ☐
No ☐

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21. I, the undersigned representative or authorized agent for the association, certify that the foregoing statements and answers are true and I have not suppressed any information that might affect the Board's decision to accept this application. I certify that I have read, understood and complied with all the laws of Virginia under the applicable provisions of Title 54.1, Chapter 23.3, and Title 55.1, Chapter 18, Chapter 19, Chapter 21 of the *Code of Virginia* and all related Virginia Common Interest Community Regulations.

Signature of Representative _____

Printed Name of Representative _____

Representative's Title _____ Date _____

MEMBERS OF CURRENT BOARD OF DIRECTORS & OFFICERS

(If more space is needed, attach additional sheets of paper with the certificate number)

Associations shall notify the Board office, in writing, within 30 days of any change of address, change of members of the governing board and any other changes in the information that was reported on the association's previous annual report filing.

Name	Title	Address