

# THREE SPRINGS HOMEOWNERS ASSOCIATION

## Electronic Communication Consent Form

We are asking all homeowners in the Three Springs community to authorize us to communicate with you by e-mail in lieu of first class mail, specifically for annual mailings such as the budget and audit reports, as well as newsletters, **billing statements**, and other documents concerning the Association. **Any electronic record satisfies the “in writing” requirement, so long as it comes in a form that can be retained electronically or printed as per 2014 Davis Stirling Act 4035-4045.** Transmitting them by e-mail will reduce printing and mailing costs for your Association. We would also be able to contact you quickly in case of an emergency in the community.

This form (“Consent”) is intended to authorize Three Springs Homeowners Association (“Association”) to communicate with the undersigned via Electronic Communication in lieu of first class mail or other methods. The phrase “Electronic Communication” includes communication by electronic mail (facsimile and e-mail); televised meetings; conference calling; webcams; electronic message board, network and website; and any other similar means of electronic communication.

If you agree to this form of communication, please complete the bottom portion of this letter and return it to us by e-mail, fax or standard mail using the numbers listed below. If we do not hear from you, we will continue to send all materials by regular mail.

We urge you to sign up for this method of communication if you have e-mail, and assure you that that by checking the box at the bottom of the page, your information will be kept strictly confidential and used only for Association-related matters. If you do sign up, but change your mind in the future, you may revoke your consent at any time by notifying us in writing that you wish to do so.

This authorizes the Three Springs Homeowners Association to communicate with the undersigned via e-mail in lieu of first class mail for transmitting Association documents.

\_\_\_\_\_  
Print Member Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Member Signature

\_\_\_\_\_  
Address

\_\_\_\_\_  
e-mail address

\_\_\_\_\_  
Phone Number

- Please check this box to receive your yearly billing statement and all other correspondence via email.**
- Please check this box to receive all other correspondence except the billing statement via email.**
- Please check this box to remove your contact information from any documents that may be accessible by the Association’s members.**

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