



STATEMENT OF ACCOUNT/ESTOPPEL REQUEST

LOXAHATCHEE RIVER ENVIRONMENTAL CONTROL DISTRICT
2500 JUPITER PARK DRIVE, JUPITER, FL 33458-8964
Phone: 561-747-5700 Option 2; Fax: 561-747-9929; www.loxahatcheeriver.org
Email: billing@lrecd.org

THE UNDERSIGNED, AS OWNER OR AUTHORIZED AGENT FOR THE OWNER, REQUESTS THE STATUS OF ANY AND ALL FEES AND CHARGES AGAINST THE FOLLOWING:

PROPERTY OWNER(S): _____

PROPERTY ADDRESS: _____

LEGAL DESCRIPTION (Lot, Block, Plat Book/Page: ORB/Page; Development Name) _____

AND/OR TAX PARCEL ID# (PCN#): _____

TITLE CO. OR ATTORNEY NAME: _____ File/Ref: _____

COMPANY ADDRESS: _____

PHONE # _____ EMAIL _____ FAX# _____

TRANSACTION TYPE: Refinance Sale Scheduled closing date: ___/___/___

PLEASE NOTE: For Property Sales a Warranty Deed and Change of Ownership form is REQUIRED
Link to Change of Ownership Forms: <https://loxahatcheeriver.org/customer-service/info/>

Estoppel processing is \$25.00 and must be paid in advance.

Payment Information:

Paid Online (www.loxahatcheeriver.org select 'Pay My Bill') on _____ (Date/Time). When making payment online, please clearly indicate Estoppel payment and property address in the Notes/Special Instructions section.

Phoned in Credit/Debit card payment on _____ (Date/Time) and my confirmation number is _____

Check Payment Attached Charges are Prepaid/Recurring under the following account: _____

Authorized Signature _____ **Printed Name:** _____

Loxahatchee River District Supplied Information

The account is Current. \$ _____ was paid for the quarter of ___/___/___ through ___/___/___.*
The next Quarterly Sewer Service charge is \$ _____ for the period ___/___/___ through ___/___/___.*

Payment for Quarterly Sewer Service in the amount of \$ _____ IS DUE for the quarter of ___/___/___ through ___/___/___.*

Account is Delinquent in the amount of \$ _____ for quarterly periods(s) between ___/___/___ and ___/___/___.*

The account is in "Lien Status" and may have Property Lien(s) filed.

Paid by condo Within District boundary Not within District boundary Assessed Area See attached

Total Amount Due: \$ _____ Signed: _____ Date: _____

Loxahatchee River District Agent

Loxahatchee River District Account # for this property: _____

The District will apply a Late Fee equal to 10% of each delinquent Quarterly Service Charge for Sewer Service.

* We reserve the right to correct the above for any errors & omissions and/or miscalculations, and, therefore, request you immediately advise this office of any discrepancies noted in the above figures prior to disbursement to avoid delays for additional funds as may be due regarding the District's lien(s). No Satisfaction will be prepared until all amounts due for outstanding charges/liens (by virtue of the Notice of Lien Rights recorded in the Public Records) are received and funds have cleared. Information provided is to answer your inquiry to best of our present knowledge, but reservation of all rights is retained to seek any additional monies due, pursuant to lien rights. Responses are made in good faith and are based on limited review of customer's account at this date. Last updated 9/7/16