(final)

**Re: Important In-Unit Component Inventory Form**

Dear Fairlington Meadows Owner:

The Fairlington Meadows Board of Directors is continuing to seek information about the age of appliances in Meadows units in order to get more competitive quotes from more insurance companies for the condo association’s master policy. (Our current policy does not expire until 12/31/24.) This is a major expense in the budget. Because most insurance losses are related to heating and cooling (HVAC) systems, or water heater and plumbing-related leaks, insurance companies want to know the age of these systems in the aggregate across the Meadows.

The Meadows Board is asking all unit owners to fill out and submit the enclosed **In-unit Component Inventory Form.** As more owners supply this information, the chance that the Meadows will qualify for more competitive future insurance quotes improves.

Please note that industry standards recommend two (2) HVAC (heating & cooling) system inspections in the spring and fall, and at least one (1) water heater and plumbing component inspection (normally in the spring) by a licensed professional. Taking these actions will reduce insurance loss expenditures, as most insurances losses are related to HVAC or water heater and plumbing related leaks.

Meadows Board of Directors

**IN-UNIT COMPONENT INVENTORY FORM – FAIRLINGTON MEADOWS CONDOMINIUM**

Please submit this completed form by one of the following methods:

* Bring this completed form when you pick up your Meadows Recreation/Pool Cards.
* Deposit the form in the mailbox at the Meadows Maintenance Office at:

3465 S. Utah Street.

* Email the scanned form or a photo image to our CMC Property Manager, Ann Palbalkar at:

APalbalkar[@CMC-Management.com](mailto:WAbraham@CMC-Management.com)

* Mail the completed form to CMC Management Office located at:

4800 Westfields Boulevard, Suite 300, Chantilly, VA 20151

Attn: Ann Palbalkar

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Unit Owner(s) Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Unit Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Three (3) Digit Unit Number \_\_\_\_\_\_ \_\_\_\_\_\_ \_\_\_\_\_\_\_

Unit Owner Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Unit Owner Mobile Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please indicate when the items below were **most recently updated** (i.e., the age of the components). If you do not know when the equipment was installed, please indicate the date (month / year) of the most recent inspection or maintenance work performed on each system.

|  |  |  |
| --- | --- | --- |
| **Unit Component** | **Date Installed (month/ year)**  **(**If age of component is unknown, please fill out next column**)** | **Date of Most Recent Inspection or Maintenance** |
| **Heating /Air Conditioner /**  **Heat Pump** |  |  |
| **Hot Water Heater** |  |  |
| **Washing Machine Hoses (replaced when new machine is installed)** |  |  |
| **Dishwasher** |  |  |

**Is the unit equipped with hard wired smoke detectors with battery backup?** Y/N \_\_\_\_\_\_\_\_\_\_\_\_\_\_­­