

ESTOPPEL REQUEST FORM

LOXAHATCHEE RIVER ENVIRONMENTAL CONTROL DISTRICT

2500 JUPITER PARK DR., JUPITER FL 33458-8964

PHONE: 561-747-5700 OPTION 2

FAX: 561-747-9929

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 _____

PROPERTY ADDRESS _____

LEGAL DESCRIPTION _____

ATTORNEY/TITLE CO. NAME: _____

ADDRESS: _____

FAX # _____ PHONE _____ FILE# _____

NAME OF PERSON SIGNING REQUEST: _____

FILE OR REF. #: _____
.....

_____ Current Quarter in the amount of \$ _____ through the date of _____

_____ Delinquent in the amount of \$ _____ for the quarter of _____

The next billing in the amount of \$ _____ will be for the quarter of _____

_____ SEE BELOW

Paid by condo _____ No sewer available at this time _____ Not within district boundaries _____

Signed: _____
Loxahatchee River District

Date: _____

ACCOUNT #: _____

Please notify customer service at 561-747-5700 Option 2
Or fax 561-747-9929 with new customer information.
Warranty Deed required.

Notice: A 48 hour processing period
of all estoppels will be required by
this office.