# <u>COLLEYVILLE HERON POND HOA</u> MANAGEMENT CERTIFICATE - TARRANT COUNTY

In accordance with Texas Property Code Section 209.004, Texas Residential Property Owners Protection Act, **COLLEYVILLE HERON POND HOA**, certifies as to the following:

1. The name of the subdivision is:

### **HERON POND**

2. The name of the association is:

## **COLLEYVILLE HERON POND HOA**

3. The recording data for the subdivision (plat) is:

### Declaration of Covenants Conditions and Restrictions Doc. D215154125

4. The recording data for the declaration (including covenants, bylaws, and rules and regulations) is:

Certificate of Formation	Doc. D215157408
Bylaws	Doc. D215157408
CCR Violation Fine Structure (Repealed)	Doc. D216292642
Architectural Review Committee Policy	Doc. D221251767
Religious Display Policy	Doc. D221251772
<b>Contract for Services and Bidding Policy</b>	Doc. D221251773
<b>Contract for Security Measures Policy</b>	Doc. D221251774
Swimming Pool Enclosure Policy	Doc. D221251777
Collection Policy	Doc. D221251778

5. The recording data for each amendment to the declaration (including covenants, bylaws, and rules and regulations) is:

<b>CCR Violation Fine Structure</b>	Doc. D219300608
First Amendment to the Declaration of Covenants	
Conditions and Restrictions	Doc. D220028438

6. The mailing address for the association is as follows:

#### **COLLEYVILLE HERON POND HOA**

c/o Vision Communities Management Incorporated 5757 Alpha Road, Ste. 680 Dallas, Texas 75240

7. The name, address, telephone number, and email address of the person managing the

association or the association's designated representative are as follows:

Vision Communities Management Incorporated 5757 Alpha Road, Ste. 680 Dallas, Texas 75240 Phone: (972) 612-2302 Email: info@vcmtexas.com

8. The website address on which the association's dedicatory instruments are available:

https://heronpond.nabrnetwork.com

9. The following fees are charged by the association relating to a transfer of property within the association:

\$250.00	Resale Certificate
\$50.00	Statement of Account
\$50.00	Refinance Certificate
\$250.00	Transfer Fee to management company
\$250.00	Capital Reserve/Improvement Fund

EXECUTED as of 2022.

Vision	Com	munities	Mar	nagen	nent	
Incorporated	i as	managing	agent	for	the	
association			0	- A		
By (signatur	re):	8.	ba	ld	lu	
Name (print	ed): _	SHAN.	MON	B	ALOW 1.	N
Title		Ca	0			

The:

The State of Texas § County of Dallas §

This instrument was acknowledged before me on the 20th day of <u>December</u>, 2022, by \_\_\_\_\_\_ Shannon Baldwin (name), the <u>CO()</u> (title) authorized agent for Vision Communities Management Incorporated.



Notary Public - The State of Texas

After Recording, Please Return To: Vision Communities Management Incorporated 5757 Alpha Road, Suite 680 Dallas, TX 75240