



Acknowledgement Form

NO SMOKING POLICY

Smoking is not permitted in any of the Residences, common areas of the Community, or on the grounds of the Community. Violation of this provision will be deemed a default under the Resident's Agreement and may result in the termination of the Agreement.

DIRECT WITHDRAWAL OF MONTHLY FEES POLICY

All incoming Residents Willow Valley Communities are required to have their monthly fees and any other applicable charges directly withdrawn from their bank account. Ask for a copy of the Direct Pay Program authorization form for more details.

(Please sign and return the section below)

I acknowledge that I have received the:

- ✓ Steps for Reserving a Residence
- ✓ Resident ' s Agreement
- ✓ Current Disclosure Statement
- ✓ No Smoking Policy
- ✓ Direct Withdrawal of Monthly Fees Policy
- ✓ Insurance Responsibility Form

Signature(s) _____

Date _____