

**Highland Hills Maintenance Commission**  
**Owner Contact Information and Electronic Notification Consent (E-Consent) Form**

**Dear Fellow Highland Hills Property Owner,**

Highland Hills is a private residential community. Each owner of property in Highland Hills, by virtue of such ownership, is a member of the Highland Hills Maintenance Commission (HHMC), a homeowners' association (HOA). Primary among its functions, HHMC is responsible for maintaining the roads and storm water runoff drainage system within Highland Hills as described in the Articles of Incorporation.

Please complete the form on Page 2, whether you are a new Owner, or a current Owner with updates to submit. This form is also available on the HHMC Website at <https://www.hhmcsequim.org> or by requesting one by emailing [info@hhmcsequim.org](mailto:info@hhmcsequim.org). Information is for HHMC business purposes only.

As an Owner, if you have Tenants occupying an HHMC residence, whether your Tenant is new, or a current Tenant with updates to submit, complete the Owner-Tenant Contact form. This form is available on the HHMC Website at <https://www.hhmcsequim.org> or by requesting one by emailing [info@hhmcsequim.org](mailto:info@hhmcsequim.org). Information is for HHMC business purposes only.

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**HOMEOWNERS CONTACT INFORMATION**

In Accordance with Revised Code of Washington (RCW) 64.38 and Board Policy 1-5, HHMC is required to keep a record of names and addresses of Owners and other occupants in the association. To conduct HOA business, HHMC maintains records of property identification and owners' contact information (name, mailing address, and phone number).

The Clallam County Assessor's Public Property Records are the official source of property descriptions (Geo ID or Prop ID), parcel maps, and Owner names and addresses for HHMC. **It is incumbent on the Owner(s) to update the County Assessor's office of changes to Owner Title and Mailing Address. It is also the responsibility of the Owner(s) to notify HHMC, in writing or email, of updates to name, mailing address, phone numbers or email addresses.**

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**ELECTRONIC NOTIFICATION CONSENT (E-CONSENT)**

In 2017, the By-laws of HHMC were amended to permit notice and other association documents to be delivered to members by electronic transmission (e.g., email) in addition to US Mail and hand delivery. For efficiency and financial reasons your Board of Trustees has determined that electronic transmission of information should now be the preferred means of notice delivery to members. You are therefore strongly encouraged to register to receive HHMC information electronically through the HHMC Website and/or the property owners' e-mail.

In accordance with Revised Code of Washington (RCW) 64.38, regarding Homeowner Associations, electronic transmission is allowed only to those who have consented, in writing, to receive electronically transmitted notices.

- I / we hereby consent to receipt of documents from HHMC by e-mail or other electronic means. This consent applies, without limitation, to notices, newsletters, minutes, personal invoices, budgets, financial statements, and other documents by e-mail, instead of USPS mail or personal delivery, to the e-mail address(es) designated on the form. This does not preclude HHMC from sending documents by other means.
- I / we understand that e-mail communication will be used to replace written notices that are required by HHMC governing documents and/or Washington law.
- I / we understand that our e-mail address(es) will become an official record of HHMC.
- I / we understand this consent will remain in effect until a written revocation notice is sent to HHMC.
- I / we understand any email updates are the sole responsibility of the homeowner to communicate to HHMC.
- I / we understand we have the right to receive any document on paper or in non-electronic form under this Consent, if specifically requested in writing to HHMC.
- I / we understand we may revoke our consent to receipt of documents at any time by providing HHMC with signed written notice.

**Return Owner form to HHMC by  
USPS Mail at PO Box 2198, Sequim WA 98382 OR  
Scan the form and submit it by e-mail to [info@hhmcsequim.org](mailto:info@hhmcsequim.org).**

**PROPERTY DESCRIPTION**

HHMC Street Address or Parcel / Lot	Clallam County Geo ID or Property ID (if known)
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**OWNER 1 CONTACT INFORMATION**

Legal Name First, Middle Initial, Last		If different, name by which you wish to be known:	
Mailing Address (Property Street Address, PO Box, Other USPS Address)			
Phone Number(s) (Only numbers on which you want to be contacted.)	Landline:	Mobile	Business
Yes, I want to receive the <b>Highland Hills Monthly Newsletter</b> (available only by email or on HHMC website) Please carefully print to be readably accurate.			
<input type="checkbox"/> Send to Email Address:			

**OWNER 2 CONTACT INFORMATION**

Legal Name First, Middle Initial, Last		If different, name by which you wish to be known:	
Mailing Address (Property Street Address, PO Box, Other USPS Address)			
Phone Number(s) (Only numbers on which you want to be contacted.)	Landline:	Mobile	Business
Yes, I want to receive the <b>Highland Hills Monthly Newsletter</b> (available only by email or on HHMC website) Please carefully print to be readably accurate.			
<input type="checkbox"/> Send to Email Address:			

**If there are additional Owners or persons in the residence, please provide same information on separate sheet.**

**By typing your name in the signature boxes below, you are agreeing to accept it as an Electronic Signature.**

**ELECTRONIC NOTIFICATION CONSENT**

I /we consent to receive Highland Hills Maintenance Commission related communications electronically as described above.

**Owner 1 Electronic Notification Consent at the following email address**

Email Address:		Please carefully print to be readably accurate.
Date:	Signature:	Print name:

**Owner 2 Electronic Notification Consent at the following email address**

Email Address:		Please carefully print to be readably accurate.
Date:	Signature:	Print name:

**OPT OUT**

I /we opt out of the electronic communication option offered by HHMC at this time. Please continue to send my notices and documents via USPS mail.

Date:	Signature:	Print name:
Date:	Signature:	Print name: