



**REQUEST FOR DISCLOSURE PACKET**

**Please mail, email or hand deliver request to:**

Hethwood Foundation, Inc. 750 Hethwood Blvd., Apt. 100H Blacksburg, VA 24060  
Voice: 540.552.5252 [info@hethwoodfoundation.com](mailto:info@hethwoodfoundation.com), [www.hethwoodfoundation.com](http://www.hethwoodfoundation.com)

_____	_____
Date Request Received	Date Packet Needed
_____	_____
Requesting Person/Seller's Agent	Name of Real Est. Co.
Circle method of delivery requested: <u>You Pick-Up</u> <u>USPostal</u> <u>Electronic</u> <u>Overnight</u> <u>We Hand Deliver</u>	

**If you do not pick up the packet, you will be billed for actual delivery costs.**

Contact Number: _____	Contact Number: _____
Address of Property: _____	Phase and Lot #: _____
Purchaser's Full Legal Name & Address: _____ _____ _____	Seller's Full Legal Name & Address: _____ _____ _____
Contact Number: _____	Contact Number: _____
Closing Attorney: _____	Contact Number: _____

Address: \_\_\_\_\_

**PLEASE ALLOW TEN (10) DAYS FOR PREPARATION OF PACKAGE.**

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**FOR FOUNDATION USE ONLY:**

Date Disclosure Packet Request Received: \_\_\_\_\_ Received via email in person letter  
Packet Picked-Up by \_\_\_\_\_ Date \_\_\_\_\_  
Packet Delivered How? \_\_\_\_\_ Date \_\_\_\_\_  
Fee Received: \_\_\_\_\_ Check Number: \_\_\_\_\_ Invoice Number: \_\_\_\_\_  
Acknowledgement Form Received: \_\_\_\_\_  
Disclosure Package Notice Received: \_\_\_\_\_

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