### Delray Oaks Condominium Association, Inc. BIG DOW

### A CORPORATION NOT-FOR-PROFIT NOTICE OF MEETING TO CONSIDER A SPECIAL ASSESSMENT

**NOTICE IS HEREBY GIVEN**, pursuant to Florida Statute 718 and in accordance with the By-Laws of the above Association. A Special Assessment Meeting will be held at the following date, time and place:

Date:

September 13, 2023

Time:

6:00 PM

Location:

Zoom

Meeting ID: 898 8656 9070

Passcode: 799254

### AGENDA

- 1. Discussion to ensure passage of a special assessment totaling \$388,261.24 for extra costs to date (shortfall) for insurance..
- 2. Board vote to approve payment:

QUADS-----1330 SQ.FT. X \$1.33 =\$1768.90 divided by 9 months = **\$ 196.55 per month for 9** months

2B ROOMS ------1263 SQ. ST. X \$1.33 = \$1679.79 divided by 9 months = **\$186.64 per month for 9** months

3B ROOMS------1673 SQ.FT. X \$1.33 = \$2225.09 divided by 9 months = \$247.23 per month for 9 nonths

Payment can be paid in full by October 1, 2023 or spread over the next nine months ending June 2024

Late Fees will apply

### Delray Oaks Condominium Association, Inc. LITTLE DOW

### A CORPORATION NOT-FOR-PROFIT NOTICE OF MEETING TO CONSIDER A SPECIAL ASSESSMENT

**NOTICE IS HEREBY GIVEN**, pursuant to Florida Statute 718 and in accordance with the By-Laws of the above Association. A Special Assessment Meeting will be held at the following date, time and place:

Date:

September 13, 2023

Time:

6:00 PM

Location:

Zoom

Meeting ID: 898 8656 9070

Passcode: 799254

### AGENDA

- 1. Discussion to ensure passage of a special assessment totaling \$37,234.35 for extra costs to date (shortfall) for insurance..
- 2. Board vote to approve payment:

\$846.35 divided by 9 months = \$94.03/month for 9 months

Payment can be made in full by October 1, 2023 or spread over the next nine months ending June 2024.

Late Fees will apply

3. Adjournment

## DELRAY OAKS CONDOMINIUM ASSOCIATION NO. 1, INC. BUDGET SUPPORT/PREMIUM SUMMARY

Policy Type	Premium			
Property	\$54,763.60			
General Liability	\$57,636.61			
Equipment Breakdown	\$ 1,157.00			
Crime/Fidelity	Included			
Directors & Officers	\$10,143.91			
Umbrella	\$ 6,061.11			
Workers Comp	\$ 599.00			
Total Phase 1 Package	\$130,361.23			
Phase 1 covers all of Big Dow and Little Dow. This is the 15-85 representation.				

### Phase 2:

Citizens Property and Windstorm policy 1 Paid on or about 5.25.2023 direct to Citizens	<b>\$174,048.00</b> Includes coverage for 16	
	Condo buildings,	
	Clubhouse	

Phase 2 covers the clubhouse, the Garden Apartments and Little Dow

Phase 3	\$440,458.50
	5 MIL excess of policy
	Deductibles,

Phase 3 covers Big Dow Quads only

#### **PREDICTION OF COST OF INSURANCE 2024**

Please keep in mind we budget in 2022 for 2023 payments. This year we covered the increase through the contingency fund. We cannot do that for 2024. Please see below the figures for 2024.

#### **BIG DOW**

PHASE I

\$132,968.00 20%

**PHASE II** 

\$132,288.24 20%

**PHASE III** 

\$528,550.00 20 %

**BIG DOW TOTAL INSURANCE FOR 2024** 

\$793,806.24 20%

COLLECTED 2023 - \$405,545.00

**ASSESSMENT** 

\$ 388,261.24

**LITTLE DOW** 

PHASE I

\$23,465.02 20 %

**PHASE II** 

\$75,835.76 20%

NO PHASE III FOR LITTLE DOW

**LITTLE DOW TOTAL INSURANCE FOR 2024** 

\$99,300.78 20%

COLLECTED 2023 -\$62,066.00

**ASSESSMENT** 

\$37,234.78

Delray Oaks Condominium Association, Inc. C/o Mahogany Services, Inc. 21 S.E. 5<sup>th</sup> Street, Suite 200 Boca Raton, FL 33432 Phone: 561-997-6453

Email: Lheller@mahoganyservices.com

# REQUEST FOR UPDATE OF UNIT OWNER INFORMATION PLEASE COMPLETE TO ENSURE YOU ARE RECEIVING ALL EMAIL BLASTS FROM THE COMMUNITY

Mahogany Services is currently in the process of compiling all homeowner information for Delray Oaks West residents. In order to ensure that all information is up-to-date, please fill in the information below. For your convenience, you can mail, or email this form to Mahogany Services, Inc., Please be sure to OPT IN or OPT OUT below for email blasts from the community.

#### PLEASE PRINT LEGIBLY

Name:			
Name:			•
Address:			
Secondary Address:			***************************************
Home Phone:	Cell:	Work:	
Other Phone:		Fax:	
Email 1:			
Email 2:			
Emergency Local Cor	ntact (Name/Relationship)	):	
Emergency Local Cor	ntact Phone:		
Additional Information	1:		
			•