

Sure Pay

AUTHORIZATION AGREEMENT FOR PRE-ARRANGED PAYMENTS

Property Name: _____

Property Address: _____

Unit or Lot # _____

I (we) authorize _____ (Property Name), hereinafter called COMPANY, to initiate debit entries to my (our) Checking account indicated below and the depository name below, hereinafter called DEPOSITORY, to debit the same such account.

BANK NAME (Depository): _____

CITY: _____ STATE: _____ ZIP: _____

TRANSIT/ABA NO. _____ ACCOUNT NO. _____

CHECKING [] SAVINGS []

This authority is to remain in full force and effect until COMPANY and DEPOSITORY has received written notification from me (or either of us) of its termination in such time and in such manner as to afford COMPANY and DEPOSITORY a reasonable opportunity to act on it. I (or either of us) has the right to stop payment of a debit entry by notification to DEPOSITORY at such time as to afford DEPOSITORY a reasonable opportunity to act on it prior to charge account. After account has been charged, I (we) have the right to have the amount of erroneous debit immediately credited to my account by DEPOSITORY, provided I (we) send written notice of such debit entry error to DEPOSITORY within 15 days following issuance of the account statement or 45 days after posting, whichever occurs first.

NAME: _____ PHONE: _____

SIGNATURE: _____

DATE: _____

Please attach voided
check HERE

When completed mail back to:
Arizona HOA Management, Inc.
10000 N. 31ST Ave, C-205
Phoenix, Arizona 85051
602-944-3338 ext 1