91 Clinton Road, Suite 2D Fairfield, NJ 07004 P (973) 228-5477 F (973) 228-5422





## <u>Preauthorized Electronic Assessment Payment Services – ACH</u>

What: Through Community Association Banking, a division of First Citizens Bank, N.A, we offer association homeowners an opportunity to pay their association assessments using preauthorized electronic payments. Preauthorized electronic payments mean that homeowners can pay their periodic assessments automatically without writing checks, thus reducing the potential for late payments. In addition, the association is assured prompt, predictable payments to help better manage funds. This program is available to all homeowners regardless of where they bank.

**How:** The preauthorized electronic assessment payment service uses the Federal Reserve System's Automated Clearing House (ACH) to facilitate electronic transfers from homeowner checking and savings accounts directly into the association's bank account. Funds are transferred on a pre-selected day of the month and appear on the homeowner's bank statement each month. Information regarding payments is reported to the association's management or bookkeeping company on the same day funds are deposited to the association's account.

## Preauthorized Electronic Assessment Payment Service Agreement & Disclosure

Preauthorized debits to your account will be processed, on the due date, for the amount of your assessment payment. Payments so collected will be deposited to the checking or savings account of your association, maintained with First Citizens Bank, N.A.

Your association may direct us to make changes to the assessment amounts and/or due dates in accordance with the governing documents and applicable statutes. You will be given notification of these changes in accordance with applicable law.

You may cancel this Agreement at any time without cause by notifying us in writing at our company address at least three (3) business days prior to the proposed effective date of termination. You may also contact your financial institution directly.

**To Enroll:** Read, complete, and sign the Preauthorized Electronic Assessment Payment Services Authorization Form below. Attach a voided check to this authorization and mail to:

(Your Association Name), c/o Cedarcrest Property Mgt, 91 Clinton Rd, Ste 2D, Fairfield, NJ 07004, Att: Accounting Dept.

Keep above for your records. Send below to Cedarcrest.

## Preauthorized Electronic Assessment Payment Service Authorization Form (please print)

ASSOCIATION NAME:		ACCOUNT NUMBER:	
NAME(S) LAST:		FIRST:	MI:
ADDRESS			
CITY	STATE	ZIP	
DAYTIME PHONE NUM	BER		
	entries to my (our)	checking/savings account at	rred to as MANAGER, as agent for the association named the depository named below, hereinafter referred to as
DEPOSITORY NAME			
Agreement & Disclosure MANAGER has received	Statement receipt d written notification o act on it. I under	of which I hereby acknowledge n from me (or either of us) of it	is Preauthorized Electronic Assessment Payment Service le. This authority is to remain in full force and effect until its termination in such manner as to afford MANAGER a s at least three (3) business days prior notice in order to
SIGNATURE (REQUIRE	D)		(DATE)
SIGNATURE (REQUIRE	D)		(DATE)