



## Authorization for Direct Withdrawal of Association Dues

To enroll in the Automatic Payment Program, just fill out the information below.

**YES, please put my association dues on "Automatic".**

Association: \_\_\_\_\_

Homeowner Name(s): \_\_\_\_\_

Primary Address (on bank account): \_\_\_\_\_

Current Association Due Amount:     \$ \_\_\_\_\_

Checking Account Number:             \_\_\_\_\_

Bank Account Routing Number:        \_\_\_\_\_

(PLEASE ATTACH A VOIDED CHECK FROM THE ACCOUNT TO BE DEBITED FOR YOUR ASSOCIATION DUES.)

I authorize Paradigm Properties Group, Inc. to charge my association dues payment to by bank account number shown above. I understand that the funds will be withdrawn on the **third business day** of each month and that it is my responsibility to ensure sufficient funds are in my account at that time.

I understand that if my total payment amount changes due to changes in association dues, I will receive notice from Paradigm Properties Group, Inc. and they will withdraw the new amount on the effective date of such changes unless otherwise instructed by me.

This authority will remain in effect until I instruct Paradigm Properties Group, Inc. in writing to cancel or change it. Future authorizations must be in writing and much be received by Paradigm Properties Group, Inc. 15 days prior to the 1st day of the effective month.

I also understand that if my payment is returned for "Non-Sufficient Funds" Paradigm Properties Group, Inc. will discontinue this service. I acknowledge that the origination of Automated Clearing House (ACH) transactions to my account must comply with the provisions of US Law.

Signature: \_\_\_\_\_

Association Name: \_\_\_\_\_

Address at Association: \_\_\_\_\_

Please return to Paradigm Properties Group, Inc. by: Email at [csmith@rentppg.com](mailto:csmith@rentppg.com); Fax to **814-308-9601**; or mailed/dropped off at the office located at 2029 Cato Ave. State College, PA 16801.

