



AUTOMATIC PAYMENT PROGRAM

Draper and Kramer, Incorporated offers an automatic payment option, which allows your monthly charges (Balance Due) to be automatically deducted from your checking bank account.

BENEFITS:

- There is no charge for using the Automatic Payment option.
- Balance due is always paid on time.
- Convenient: no checks, stamps or delays with the mail system.

HOW IT WORKS:

- The outstanding balance reflected on your statement will automatically be withdrawn from your checking account on the date reflected on your statement.
- You will continue to receive a regular monthly statement to keep track of your monthly charges.
- You may stop an automatic payment at any time by notifying your building management office at least 5 business days prior to the payment date.
- Your bank account must hold the full amount of your payment, in available funds, on the payment date specified on your monthly bill.
If there are insufficient funds in your account on the payment date, your bank will reject the payment. In this situation, you may be assessed late fees by your condo association and bank fees by your bank.

AUTHORIZATION AGREEMENT FOR AUTOMATIC PAYMENT PROGRAM

I authorize Draper and Kramer, Inc. and the financial institution designated below to begin deductions for Automatic Payment Plan payments.

OWNER INFORMATION (AS IT APPEARS ON THE BANK ACCOUNT)

OWNER NAME (please print) <input type="text"/>		NAME OF THE ASSOCIATION <input type="text"/>	
CONDO STREET ADDRESS (Condo building address, not your off-site mailing address) <input type="text"/>		CONDO UNIT # <input type="text"/>	CONDO ACCOUNT# (xxxxTxxxxxxx) <input type="text"/>
<input type="checkbox"/> I WISH TO ENROLL IN THE E-STATEMENT PROGRAM	SEND E-STATEMENT TO THIS EMAIL ADDRESS (only one e-mail address can be used for electronic delivery of statements) <input type="text"/>		

BANK ACCOUNT INFORMATION

BANK NAME <input type="text"/>		BANK TRANSIT # <input type="text"/>		BANK ACCOUNT # <input type="text"/>	
BANK STREET NAME <input type="text"/>		CITY <input type="text"/>		STATE <input type="text"/>	ZIP <input type="text"/>
<i>I understand that I must continue to remit my monthly payment by check until I receive confirmation on my statement of the date automatic payment will begin. Note: If the payment date falls on a weekend or Holiday, I understand the payment will be made on the next following business day. By signing below, I am confirming that I am an authorized signer on the bank account and approve direct debit for the monthly assessment for the unit above.</i>					
AUTHORIZED SIGNATURE <input type="text"/>				DATE <input type="text"/>	
<i>This authority is to remain in effect until Draper and Kramer, Inc. (at my building management office) or my financial institution has received written notification from me of termination at least 5 business days prior to the payment date to allow Draper and Kramer, Inc. or my financial institution a reasonable opportunity to terminate the direct debit payment or until Draper & Kramer, Inc. or my financial institution has sent me written notice of termination of this agreement.</i>					
SITE MANAGER NAME		BUILDING #	CORPORATE APPROVAL		DATE

PLEASE ATTACH A VOIDED CHECK HERE FOR THE ACCOUNT LISTED ABOVE