## **Autopay Form**

Preauthorized Electronic Assessment Payment Service Agreement and Disclosure Statement



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1. Read, complete and sign this form.

2. Attach a copy of a void check.

3. Submit via email, mail or in person to:

DC Ranch Association

18867 N. Thompson Peak Parkway, Suite 100

Scottsdale, AZ 85255

Email: monika.truax@dcranchinc.com

t Name	Last Name
ne Number	Email
ond Account Holder - First Name	Last Name
ne Number	Email
ne Number Ranch Property Address	Email

Preauthorized charges to your account will be processed on the 15th day of the month for your regular assessment. Payments collected will be deposited to the account of DC Ranch Association (Association) with Alliance Association Bank. There may be changes to the assessment amounts and/or due dates in accordance with the Association's governing documents and applicable statues including notification requirements of the ACH. The Association reserves the right to make changes in the agreement at any time.

I/We hereby authorize the Association to initiate debit entries to my checking/savings account. This authority is granted in accordance with the terms and conditions of the Preauthorized Electronic Assessment Payment Service Agreement and Disclosure Statement receipt of which I hereby acknowledge. This authority is to remain in full force and effect until the Association has received written notification from me/us of its termination in such manner as to afford the Association reasonable opportunity to act on it.

Account Holder Signature (required)	Date
Second Account Holder Signature (if applicable)	Date