

**AUTOMATIC PAYMENT  
AUTHORIZATION FORM**

\_\_\_\_\_ (Homeowner) hereby authorizes **Stone Bridge Owners Association, Inc.** will sign the bank drafts as the authorized agent of Homeowner for the transactions authorized by this Payment Authorization.

This Authorization covers the regularly recurring payments detailed in the CC & R's of the Association (such as monthly assessments and any other regularly recurring charges). One-time charges, late fees, and other non-recurring charges will be handled according to the terms of the Association's Governing Documents.

Drafts will be created and submitted for payment on the first day of any month in which regularly recurring charges are due. This authorization is effective as of \_\_\_\_\_ (start date must be the first of the month), and remains in effect until cancelled by either party.

**This form must be returned to the management office by the 15<sup>th</sup> of the month proceeding the initial month of withdrawal.**

This Authorization can be revoked by the Homeowner at any time, for any reason, by 30-day written notice to the Association.

The information about the account, against which drafts/checks are to be created, is contained in the check. Attach a copy of your voided check, enclose and mail or fax along with this Authorization.

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

Name (print): \_\_\_\_\_

Unit #: \_\_\_\_\_

Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

Billing  
Address: \_\_\_\_\_  
\_\_\_\_\_

THIS FORM CANNOT BE PROCESSED WITHOUT A COPY OF YOUR VOIDED CHECK.

*Any questions please call 972-484-2060, fax 972-406-9068*

*For Office Use Only:*

Acct. # \_\_\_\_\_

Dues Amt. \$ \_\_\_\_\_

Effective \_\_\_\_\_

Recorded \_\_\_\_\_