

AUTHORIZATION AGREEMENT FOR ClearPay SERVICE

ASSOCIATION NAME Ocean Terrace Owners Association	ASSOCIATION ACCOUNT NUMBER
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☐ PRE AUTHORIZED PAYMENTS

I (We) hereby authorize **Ocean Terrace Owners Association**

C/o Association Management Group, hereinafter called COMPANY, to initiate debit entries to my (our) checking account indicated below and the depository institution named below, hereinafter called DEPOSITORY, to debit the same to such account.

This authority is to remain in full force and effect until COMPANY has received written notification from me (or either of us) of its termination in such time and in such manner as afford COMPANY and DEPOSITORY a reasonable opportunity to act on it.

I (We) understand I (we) must continue to make regular payments until I (we) am (are) notified that my (our) form has been processed.

DEPOSITORY NAME	BRANCH
CITY	STATE & ZIP CODE
TRANSIT/ABA NUMBER	ACCOUNT NUMBER

NAME(S)

SIGNATURE(S)

DATE

PROPERTY ADDRESS

ATTACH VOIDED CHECK HERE

DIRECTIONS

1. Fill out the application completely. Your account number can be found on your bill or coupon booklet. (If multiple accounts are to be included, please enter each complete account number.)
2. Void a check from your account by marking "VOID" across the front of a blank check. Only one "VOID" check is required.
3. Sign the application.
4. Enclose the application and "VOID" check in an envelope addressed to :

"Ocean Terrace Owners Association"
C/o Association Management Group
2131 Las Palmas Drive, Suite A
Carlsbad, CA 92011-1524

5. You must make your regular payments until you are notified that your application has been processed. Applications are usually processed within 30 days of receipt.
6. Assessment payments will be drafted on or around the 5th of each month.
7. If your account is more than 15 days delinquent, your request can not be accepted until your account is brought current. Once current, please contact us so we may begin your service.

Please keep this information for your records.