



**PRE-AUTHORIZED ELECTRONIC ASSESSMENT PAYMENT
SERVICE AGREEMENT AND DISCLOSURE STATEMENT**

Aegis Community Management Solutions (“Aegis”) through our financial partner Mutual of Omaha Bank offers Association members the opportunity to pay their regular and special association assessments as well as any other charges using pre-authorized electronic payments. Pre-authorized electronic payments mean that members can pay their assessments automatically without writing checks, buying postage, or trips to the mailbox. Further, Associations benefit by stabilizing the revenue stream helping to better manage the Association’s valuable resources. This service is **absolutely free** and is available to any member with a US bank account.

The pre-authorized electronic assessment payment service uses the Federal Reserve Systems Automated Clearing House (“ACH”) to facilitate electronic transfers from the members checking or savings account directly into the Association’s bank account. These transfers are completed on the first business day of each of your Associations billing periods. The transaction appears on the member’s regular bank statement, and if the member has registered their email address on the Aegis website, an email confirmation is generated with each transaction. To enroll, please read, complete, attach a voided check, and return the attached application to:

**Aegis Community Management Solutions
2 Jungle Hut Road
Suite 2
Palm Coast, FL 32137
Fax: 386-597-2845**

Please retain a copy of this application for your records. If you have any questions, please feel free to contact us at 863-256-5052 or at requests@aegiscms.com.
Sincerely,
AEGIS COMMUNITY MANAGEMENT SOLUTIONS

**PRE-AUTHORIZED ELECTRONIC ASSESSMENT PAYMENT
SERVICE AGREEMENT AND DISCLOSURE STATEMENT**

Name of Association: _____

HOA account number (listed on statement and coupons): _____

Member Name (last, middle, first): _____

Unit Address: _____ City State Zip: _____

Daytime phone number or email address: _____

I (we) hereby authorize Aegis Community Management Solutions, Inc. hereinafter referred to as MANAGER, as Agent for the Association named above to initiate electronic debit entries to my (our) checking/savings account at the depository named below, hereinafter referred to as DEPOSITORY, to debit the same to such account.

Name of Member's Banking Institution: _____

Account number: _____

Routing number: _____

Start Date for ACH: _____

This authority is granted in accordance with the terms and conditions of the MANAGER'S Pre-authorized Electronic Assessment Payment Service Agreement and all related Disclosures, receipt of which I hereby acknowledge. This authority is to remain in full force and effect until such time as the MANAGER has received written notice from owner to terminate the same, and MANAGER has been afforded a reasonable opportunity to act on the same. I understand that the MANAGER requires no less than THREE (3) days notice in order to cancel such authorization. Preauthorized debits to your account will be processed, on the due date, for the amount of your outstanding balance. Payments so collected will be deposited to the checking or savings account of your association, maintained with Mutual of Omaha Bank. Your association may direct us to make changes to the assessment amounts and/or due dates in accordance with the governing documents and applicable statutes. You will be given notification of these changes in accordance with applicable law. You may cancel this Agreement at any time without cause by notifying us in writing at our company address at least three (3) business days prior to the proposed effective date of termination.

Signature (required) Date _____

Signature (required) Date _____

Pre-authorized charges to your account will be processed, when due, for the amount of your outstanding balance. Payments so collected will be deposited into the checking/lockbox account of the ASSOCIATION. MANAGER and ASSOCIATION reserve the right to make changes in the agreement at any time and may cancel or terminate the Pre-authorized Electronic Assessment Payment Service at any time with or without cause. MEMBER may likewise terminate enrollment in the Service at any time, with or without cause, by giving sufficient written notice to the MANAGER or ASSOCIATION.

**Please remember to attach a voided check and return to:
Aegis Community Management Solutions, Inc.
2 Jungle Hut Road
Suite 2
Palm Coast, FL 32137**