

**UNIVERSITY TERRACE CONDOMINIUM
HOMEOWNERS ASSOCIATION**

HOA MANAGEMENT COMPANY TEAM
3107 S. Evans St. Suite B
Greenville, NC 27834

AUTHORIZATION AGREEMENT FOR DRAFTS

New Draft: _____ Change Draft: _____ Stop Draft: _____

UNIT NUMBER(s): _____ EFFECTIVE DATE: _____

I (we) hereby authorize HOA MANAGEMENT CO., LLC to draft \$ _____ against my account for the payment of University Terrace Condominium HOA dues on the 5th day of each month. I understand that this authority shall remain in full force and effect until written notification is received from me of its termination in such time and in such manner as to afford the association a reasonable opportunity to act on it. If I am notified that association dues are going to increase, I understand that my draft will automatically increase at the time listed in the notice.

OWNERS NAME: _____

MAILING ADDRESS: _____

BANK NAME: _____

BANK ROUTING NUMBER: _____

CHECKING ACCOUNT NUMBER: _____

SIGNATURE: _____ DATE: _____

If you have any questions or concerns on the drafting of dues, please contact Linda Price, Community Manager at 252-565-4820 ext. 7 or lpricehoa@gmail.com.

VOIDED CHECK MUST BE ATTACHED