

Preauthorized Electronic Assessment Payment Service Agreement and Disclosure Statement for Electronic Payment of Rent or Assessments

to initiate DEBIT en DEPOSITORY. I (we	orize <u>Country Aire Esta</u> atries to my (our) account e) acknowledge that the c S. laws and regulations.	t at the financial ins	titution listed be	elow, hereinaft	er called		
Bank Name:			Branch:	Branch:			
Bank Address:	Street	City	State	Zip			
Routing & Transit N	Number:					_	
Account Number: _						_	
*You mus	st attach a voided che	<mark>ck <i>or</i> a financial i</mark>	nstitution acc	<mark>count verific</mark> a	<mark>ation letter</mark>		
	is to remain in full force a ermination in such a time					•	
•		Please Print					
Name(s):						_	
CAE Park Address:						_	
	Street & Lot #	Cit	у	State	Zip		
Please start my ACH draft on Month:Year:		Year:		*Payments ar	e due on the 1st	of	
each month. Late fe	ees are applied if paymen	ts are not received b	y the 5th of the	month.			
Signature			Da	te:			
				<u> </u>			
Signature:			Da	te:			

Return Form To: Country Aire Estates Office 38130 McDonald Street Dade City, FL 33525

38130 McDonald Street Dade City, FL 33525 Ph. 352-567-3630 Fax: 352-567-3606

E-Mail: cae.mhp.hoa@gmail.com
Office Hours M – F, 9 am to 1 pm