

# AUTOMATIC WITHDRAWAL AUTHORIZATION

NEW

CHANGE

CANCEL

<b>TO:</b>			
Alta Views HOA, Inc.			
<i>Company Name</i>			
508 Silverleaf Dr.	Whitefish	MT	59937
<i>Address</i>	<i>City</i>	<i>State</i>	<i>Zip</i>

<b>FROM:</b>			
<i>Name</i>			
<i>Address</i>	<i>City</i>	<i>State</i>	<i>Zip</i>
<i>Daytime Phone Number</i>			

Effective:  immediately or  as of date: \_\_\_\_\_, begin using the following account number to process my automatic withdrawal.

Bank Name: \_\_\_\_\_ Account #: \_\_\_\_\_ Type of Account:  Checking  
(Please attach a voided check or deposit slip)  Savings

Routing (ABA) #: \_\_\_\_\_ Amount of Withdrawal: \_\_\_\_\_  
(The routing # is located in the lower left hand corner of your check) (Leave blank if the amount is variable)

I HEREBY AUTHORIZE THE MONTERRA AT WHITEFISH TO MAKE THE TRANSFER(S) INDICATED ABOVE UNTIL FURTHER NOTICE. IF THIS AGREEMENT CHANGES ANY PRIOR AUTHORIZATION BETWEEN THE MONTERRA AT WHITEFISH AND ME, THE PRIOR AUTHORIZATION IS HEREBY CANCELLED, AND I INSTRUCT ALTA VIEWS HOA, INC. TO FOLLOW THIS AUTHORIZATION. I FURTHER ACKNOWLEDGE THAT YOU HAVE NO RESPONSIBILITY TO CONTACT ME WHEN THE ABOVE TRANSFER OCCURS. I UNDERSTAND THAT I MAY CALL YOU TO FIND OUT WHETHER OR NOT THE TRANSFER HAS BEEN MADE. I UNDERSTAND THAT IT IS MY REponsibility TO HAVE SUFFICIENT FUNDS AVAILABLE IN MY ACCOUNT ON THE TRANSFER DATE IN ORDER FOR YOU TO MAKE THE AUTOMATIC PAYMENT. I ACKNOWLEDGE THAT IF SUFFICIENT FUNDS ARE NOT AVAILABLE THE AUTOMATIC PAYMENT(S) MAY NOT BE MADE. I FURTHER ACKNOWLEDGE THAT ALTA VIEWS HOA, INC. WILL NOT BE LIABLE FOR ANY CHARGES, INCLUDING BUT NOT LIMITED TO, ANY CHARGES RELATED TO THE ITEMS RETURNED BECAUSE OF INSUFFICIENT FUNDS.

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

ATTACH VOIDED CHECK OR DEPOSIT SLIP HERE

Cancel from Account # : \_\_\_\_\_ (7 days advanced notice required)

Email Address: \_\_\_\_\_