



# ENCORE PROPERTY MANAGEMENT

To: All Owners

Subject: Automatic Clearing House (ACH) for Association Dues Payment

We would like to invite all Owners to take advantage of ACH payment services for monthly Association Dues Payments. ACH is the process of automatically debiting your bank account for your monthly Association Dues and other Association related fees.

To sign up for this service please complete the "Authorization Agreement for Preauthorized Payment" form and return to our office. Applications received before the 20th of any given month will have the first ACH payment debited from your bank account on or about the 5th of the following month; you will receive a confirmation letter prior to your first withdrawal. Please note, acceptance into the ACH program requires that your account is current.

If you would like further information regarding ACH please feel free to contact Encore Property Management, (951) 279-3934.

Please email your application to: [cgrant@encorepmc.com](mailto:cgrant@encorepmc.com) or mail to:

Encore Property Management  
P.O. Box 1117  
Corona, CA 92878.1117

Sincerely,

ENCORE PROPERTY MANAGEMENT

# Encore Property Management

## Authorization Agreement for Preauthorized Payments

I (we) hereby authorize Management Company to initiate debit entries to my (our) checking or savings account for payment of Assessment/Association Dues/ Other Charges. Please place a ✓ mark in the box below to authorize the withdrawal of charges. Indicated below is my (our) bank and bank account number to which said debit entries should be applied.

<b>Bank Account Information</b>
Bank Name: _____
Account Holder (s) Name: _____
Bank Routing Number: _____
Bank Account Number: _____
ACCOUNT HOLDER IS REQUIRED TO CALL THEIR FINANCIAL INSTITUTION TO VERIFY THAT ELECTRONIC DEBITS WILL USE THE SAME ACCOUNT NUMBER AND ROUTING TRANSIT NUMBER AS PROVIDED ON ACCOUNT HOLDERS CHECK. IF THE FINANCIAL INSTITUTION USES A DIFFERENT ROUTING NUMBER FOR ELECTRONIC TRANSFERS, IT IS THE ACCOUNT HOLDER=S RESPONSIBILITY TO PROVIDE THAT INFORMATION ABOVE.

<b>Homeowner Information</b>
Print Name(s): _____ Ph #: _____
HOA Account Number: _____
Property Address: _____
Email Address: _____
<b>I authorize the withdrawal of assessments/association dues and other charges from my account. <input type="checkbox"/></b>
Account holder is required to complete homeowner information in its entirety for this application to be processed. Your HOA Account number is the unit/account number listed on your coupon book or statement.

This authorization is to remain in full force and effect until Management Company has received written notification from me (either of us) of its termination in such time and in such manner as to afford Management Company and my bank a reasonable opportunity to act on it.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

**This application can be emailed to: [cgrant@encorepmc.com](mailto:cgrant@encorepmc.com) or mailed to:  
Encore Property Management  
P.O. Box 1117  
Corona, CA 92878**