

## Pay your bills on time - the hassle free way.

With our Pre-authorized Payment option, your payment is made automatically on the payment due date – and you don't even have to sign the cheque.

- **Save Money**

Forget about buying stamps, incurring late payment charges and reduce your bank bill payment costs

- **Save Time**

Forget about writing cheques or making trips to the management office to pay your bills.

- **Save Worry**

Forget about cheques that get delayed in the mail or about missing your payment due date.

### How do I join?

1. Complete and sign the enrolment/ authorization below.
2. Attach your personal blank cheque marked "void".
3. Mail or deliver the enrolment/ authorization form and void cheque to our office, along with this month's payment.

**Five (5) days written notice prior to the 1<sup>st</sup> of the month is required to join, change or cancel a pre-authorized payment.**

**Note: To cancel upon sale of a unit, unit owners must send notice in writing to the condominium corporation, c/o 346 Broadway, Winnipeg, Manitoba, R3C 0T2.**

### Terms and Conditions

I (we) authorize the payee to debit my (our) account as indicated on the attached "void" cheque under the terms and conditions agreed to by me (us) with the payee until such time as written notice to the contrary is given.

I (we) acknowledge that delivery of my (our) authorization to the payee constitutes delivery by me (us) to the branch of the financial institution at which (we) maintain an account and that such financial institution is not required to verify that the payment (s) are drawn in accordance with this authorization. Termination of this authorization does/may not terminate the contract for goods or services exchanged.

I (we) will notify the Payee in writing of any changes in the account information or termination of this authorization five (5) business days prior to the next due date of the pre-authorized debit.

Items charged under any of the following conditions will be reimbursed subject to written notification by me (us) to the branch of account within 90 days.

- a) I (we) never provided authorization to the payee.
- b) The pre-authorization debit was not drawn in accordance with my (our) authorization.
- c) My (our) authorization was revoked.
- d) The debit was posted to the wrong account due to invalid/incorrect account information supplied by the payee.

I (we) warrant that all persons whose signature(s) are requested to sign on this account have signed this agreement.

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### Pre-authorized Payment Authorization

Name (s): \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

I (we) authorize **Akman Management Ltd.** to process a debit, in paper, electronic or other form in the amount of \$ \_\_\_\_\_ on my (our) account on the first day of each month beginning \_\_\_\_\_ date

- I (we) acknowledge that I (we) have read and understood all the provisions contained in the terms and conditions of the pre-authorized payment authorization and that I (we) have received a copy.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date