



## RIDGEWOOD POINTE CONDOMINIUM ASSOCIATION

### PAYMENT INFORMATION

#### Mail a Check or Cashier's Check

Make check out to **RIDGEWOOD POINTE** & mail:

(Direct to bank)

**RIDGEWOOD POINTE**

PO BOX 65764  
PHOENIX, AZ 85082-5764  
ACCT #750-HOUSE NUMBER-CU

(Adds two days to process)

**RIDGEWOOD POINTE**

C/O PROPERTY SERVICES GROUP, INC  
PO BOX 1287  
TROY, MI 48099

#### ACH PAYMENT

Complete the ACH FORM & mail with voided check to:

**PINE RIDGE MANOR**

C/O PROPERTY SERVICES GROUP, INC  
PO BOX 1287  
TROY, MI 48099

#### Online Payment

**PROPERTYPAY.CIT.COM**

Association Fee E-check & Credit Card Payment

CHOOSE "PAY NOW"

MANAGEMENT COMPANY ID: 6038

ASSOCIATION ID: 000750

PROPERTY NUMBER: 00000750-HOUSE NUMBER-CU

CIT bank fee:

ACH is \$1.95

Credit card is 2.5% processing fee

To avoid the fees, you may choose Pay by Mail or Bill Pay.

**WWW.GOZEGO.COM**

ACCOUNT NUMBER: 750-HOUSE NUMBER -CU

# *Preauthorized Electronic Assessment Payment Service Agreement and Disclosure Statement*

*For Electronic Payment of HOA Assessments*

## **To Enroll:**

Read, complete and sign the enclosed Preauthorized Electronic Assessment Payment Services Authorization form. Attach a voided check to the authorization and mail both to:

***Property Services Group, Inc.  
P.O. BOX 1287  
Troy, MI 48099***

## *Preauthorized Electronic Assessment Payment Services*

### **What:**

**Property Services Group, Inc.** through Community Association Banking, a division of Mutual of Omaha Bank, offers association homeowners an opportunity to pay their regular association assessments using automated electronic payments. Preauthorized electronic payments mean that homeowners can pay their assessments automatically without writing checks, thus eliminating the potential for late payments. In addition, the association is assured prompt, predictable payments to help better manage funds. This program is available to all homeowners regardless of where they bank.

### **How:**

The preauthorized electronic assessment payment service uses the Federal Reserve System's Automated Clearing House (ACH) to facilitate electronic transfers from homeowner checking/savings accounts directly into the association's bank account. Funds are transferred between the 5<sup>th</sup> and 10<sup>th</sup> day of the month and appear on the homeowner's bank statement each month. Information regarding payments is reported to the association's management or bookkeeping company on the same day funds are deposited to the association's account.

If you have questions or need further information, please call our Homeowners Association experts at:

***248-637-9800***

## *Preauthorized Electronic Assessment Payment Service Agreement & Disclosure*

Preauthorized charges to your account will be processed, when due, for the amount of your regular assessment payment. Payments so collected will be deposited to the checking/savings account of your ASSOCIATION, maintained with Mutual of Omaha Bank.

There may be changes to the assessment amounts and/or due dates in accordance with the ASSOCIATION'S governing documents and applicable statutes including notification requirements of the ACH (Automated Clearing House) rules.

We reserve the right to make changes in the agreement at any time. We may cancel Preauthorized Electronic Assessment Payments at any time without cause and you can terminate this agreement at any time by giving sufficient written notice or by closing the designated accounts.

**PLEASE RETAIN FOR YOUR RECORDS**

**Preauthorized Electronic Assessment  
Payment Services Authorization Card (please print)**

**Ridgewood Pointe I**

ASSOCIATION NAME

UNIT ID

NAME(S) LAST

FIRST

MI

NAME(S) LAST

FIRST

MI

ADDRESS

CITY

STATE

ZIP

DAYTIME PHONE NUMBER

EMAIL ADDRESS

I (we) hereby authorize **Property Services Group, Inc.**, hereinafter referred to as MANAGER, as agent for the association named above to initiate debit entries to my (our) checking/savings account at the depository named below, hereinafter referred to as DEPOSITORY, to debit the same to such account.

Community Association Banc

DEPOSITORY NAME

This authority is granted in accordance with the terms and conditions of the MANAGER'S Preauthorized Electronic Assessment Payment Service Agreement & Disclosure Statement receipt of which I hereby acknowledge. This authority is to remain in full force and effect until MANAGER has received written notification from me (or either of us) of its termination in such manner as to afford MANAGER a reasonable opportunity to act on it.

SIGNATURE (REQUIRED)

DATE

SIGNATURE (REQUIRED)

DATE

**ATTACH VOIDED CHECK WITH THIS AGREEMENT AND MAIL BOTH TO:**

**Property Services Group, Inc.  
P.O. BOX 1287  
TROY, MI 48099**

**Authorization must be received by the 15<sup>th</sup> day of the current month for processing to start the following month.**