

**Preauthorized Electronic
Assessment Payment
Services**

What:
Danella Realty & Mgmt Co.
through Community Association
Banc 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 1st and 10th 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:
215-968-0618
villageshires@danellarealty.com

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

**for Electronic Payment of
HOA Assessments**

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

**Village Shires, c/o Danella
Realty, 3001 E. Village
Road, Holland, PA 18966**

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

ASSOCIATION NAME _____
UNIT ID _____
NAME(S) LAST FIRST MI _____
NAME(S) LAST FIRST MI _____
ADDRESS _____
CITY STATE ZIP _____
DAYTIME PHONE NUMBER _____

I (we) hereby authorize **Danella Realty**,
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.

DEPOSITORY NAME _____

Checking Acct. Savings Acct. (Circle One)

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:**
**Village Shires
c/o Danella Realty & Mgmt Co.
3001 E. Village Road,
Holland, PA 18966**
Authorization must be received by
the 15th day of the current month for
processing to start the following
month.

**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
Community Association Banc.

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.