

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

ASSOCIATION NAME

UNIT ID (5-DIGIT ACCOUNT NUMBER)

NAME(S) LAST FIRST
MI

NAME(S) LAST FIRST
MI

ADDRESS

CITY STATE
ZIP

DAYTIME PHONE NUMBER

SOCIAL SECURITY #

I(we) hereby authorize LOUDOUN
MANAGEMENT ASSOCIATES, 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.

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

**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.

**PLEASE RETAIN A COPY OF
THIS FORM FOR YOUR
RECORDS**

***** ENROLLMENT *****

To Enroll:

Read, complete and sign the
Preauthorized Electronic
Assessment Payment Services
Authorization card (i.e., this form).
Attach a **voided check** to the
authorization card and mail both to:

**CWCA
c/o LMA, Inc.
P. O. Box 2070
Purcellville VA 20134-2070**

**Preauthorized Electronic
Assessment Payment
Services**

What:

Loudoun Management
Associates, Inc. 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 **5th 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:

(Office) 540-751-1888
(Fax) 540-751-1899
(Email) cwca@lmainc.com.

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

**CWCA
c/o LMA, Inc.
P. O. Box 2070
Purcellville VA 20134-2070**

**Which month would you like
to start your ACH?**