



CONDOMINIUM FIRST

MANAGEMENT SERVICES LTD.

www.condominiumfirst.com

FOR OFFICE USE ONLY

CORP NO. _____

UNIT: _____

START DATE: _____

FEES: _____

PRE-AUTHORIZED DEBIT (PAD) AGREEMENT

PLEASE PRINT CLEARLY

CONDOMINIUM NAME: _____

Condominium Address: _____ Unit Number: _____

City: _____ Province: _____ Postal Code: _____

OWNER INFORMATION:

Name: _____

Address: _____

City: _____ Province: _____ Postal Code: _____

Phone Number: (____) _____ email: _____

- New Owner
- Change of bank account
- Currently paying by cheque; set me up on PAD instead
- Cancel PAD

ALTERNATE PERSON ON PAD (OTHER THAN THE LEGAL OWNER OF THE UNIT):

Name: _____ Telephone: (____) _____

Address: _____

Fill this section out only if someone other than the legal owner will be paying the monthly contributions by PAD.

BANK ACCOUNT INFORMATION: BANK NAME: _____ PHONE: (____) _____

Branch Address: _____ City: _____ Province: _____ Postal Code: _____

Branch Transit Number _____ Institution Number _____ Account Number: _____

Savings Chequing PAD start date: _____ (first day of month)

PRE-AUTHORIZED DEBIT (PAD) DETAILS: You, the Payor, authorize *Condominium First Management Services Ltd.* to debit the bank account identified above for regular monthly condominium contributions and/or one-time payments from time to time as determined by the Board of the Condominium Corporation of the above address. We, the Payee, *Condominium First Management Services Ltd.* will provide you, the Payor, 10 days written notice of the amount of each regular debit, unless such notification is waived in the section below. Pre-notification will always be given to you when the regular monthly condominium contributions change and/or in the event of one-time payments. Regular monthly condominium contributions will usually be debited on the first day of the month or on the next business day, however a specific event, such as the start up of the PAD service or a new budget cycle, may cause the debit to occur on a different day.

PRE-NOTIFICATION ADVICE WAIVER

By initialing here: * you, the Payor, agree that the standard pre-notification, required 10 days prior to each debit of the regular monthly condominium contributions, is hereby waived. Pre-notification will only be required 10 days before the first debit of the regular monthly condominium contributions after an amount change and/or in the event of one-time payments. ***IMPORTANT!** In order to process your PAD monthly, this waiver **MUST** be initialed in the box above.*

These services are for: Personal Use Business Use

You, the Payor, may revoke your authorization at any time in writing subject to providing notice of 30 days. To obtain a sample cancellation form or for more information on your right to cancel a PAD Agreement, contact your financial institution or visit www.cdnpay.ca.

Signature of Account Holder: (REQUIRED)

Signature of Joint Account Holder (if applicable):

Name: _____ (print name)

Name: _____ (print name)

Date: _____

Date: _____

You have certain recourse rights if any debit does not comply with this Agreement. For example, you have the right to receive reimbursement for any debit that is not authorized or is not consistent with this PAD Agreement. To obtain more information on your recourse rights, contact your financial institution or visit www.cdnpay.ca.

When the form is complete: **FAX or MAIL** void cheque and this form to **CONDOMINIUM FIRST MANAGEMENT SERVICES LTD.:**
 810, 839 - 5th Avenue S.W., Calgary, Alberta T2P 3C8; Tel: (403) 299-1810; Fax: (403) 299-1813
OR EMAIL void cheque and this form to pap@condominiumfirst.com

