Heritage Parks Homeowners Association (HPHA)
Bank Draft Authorization Form

Form Instructions
Complete the draft form and return it with a voided check from your bank via Email or Post office listed below

Bank Account Draft information

Bank Name

Routing #

Bank Account #

1. Type of Account (Check one box)		2. Frequency of Draft (check 1 box- monthly or quarterly)	
	A. Checking Acct		A. Monthly - on the 5th day of each month
	B. Savings Acct		B. Quarterly - on the 10th day of each new quarter(Jan-Apr

Method of Notification and Statements

3. How do you wish to receive your Quarterly statements? (check 1)		A. U.S. Post Office	
		B. Email (provide valid emaill address)	

Owner Contact Information

Printed Owner Name (First, M., Last)

Printed Co- Owner Name (First, M., Last)

Email Address (default is via Post Office)

HPHA Property Address

Billing Address (if different)

Authorization Agreement

I authorize Heritage Parks Homeowners Association to draft my account as specified below for membership dues.

I further agree to maintain a sufficient balance to cover dues on each period when due. The HPHA may reply on this authorization until they receive written notice from any authorized owner of the account at least 10 days prior to the next scheduled draft date .   I understand that the HPHA will notify me by email when each draft occurs. If account is returned insufficient funds , the account will be charged with an insufficient payment fee just as any insufficient check. I acknowledge the HPHA will not be liable for any charges related to these transfers.

Signature

Property Owner	Co-property Owner

Return signed form with a "Voided" Check to via email/PO Box to: **Email: billing@heritageparksabilene.com**
Heritage Parks Homeowners Association   For more information or Questions :
PO Box 3351, Abilene, TX 79604   president@heritageparksabilene.com
                                                                               Phone 325-725-3351

A Voided check must accompany this form