

## Lofty Pines Homeowners Association

#### **Automatic Bank Draft Program**

Automatic payment from your checking or savings account assures your bill is paid in full and on time every month, even if you are out of town. This convenient, efficient, and cost-effective process is offered by Lofty Pines Homeowners Association (LPHA).

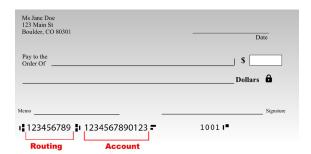
#### How do I begin the process?

To become an automatic payment customer, two items are required: 1) Complete the Automatic Bank Draft Form on the next page and 2) Send form to:

#### **Lofty Pines Homeowners Association**

C/O 5310 Ebony Place Piedmont, SD 57769

If preferred, forms may also be emailed to sagewaterworks100@gmail.com.



#### When will my payment be withdrawn from my account?

Please continue to pay your bill as normal until your bill states "Automatic Payment-Processed 20th - 25th of each month". After enrollment in the program, the exact amount of your bill will be withdrawn from your account. Automatic payment dates must correspond with the business days of the financial institutions so a 5-day window is necessary.

#### What happens if I have questions about my bill?

If you have a question about your bill, please email sagewaterworks100@gmail.com or call Marilee, Biller, at 605-431-2006

#### What happens if there is not enough money in my account?

The automatic payment will be presented to your financial institution once for processing. If your financial institution does not pay the automatic payment request because of insufficient funds and returns it to LPHA's financial institution, your account will be charged an insufficient funds fee according to the LPHA's rate/fee schedule and processed in the same manner as an insufficient funds check.

#### How do I cancel my participation?

If you decide to discontinue participation in the automatic bank draft program, email sagewaterworks100@gmail.com, or by calling Marilee at 605-431-2006.



# Lofty Pines Homeowners Association (LPHA)

### **Automatic Bank Draft Program**

Please complete the following	information:		
Customer Name: (billing account)		<del></del>	
Water Service Address:		Lot #	_
Bank Name:	City	State	_
Checking* □ Savings □			
Bank Routing Number:			_
Account Number:			_
Lofty Pines Homeowners Association other associated charges as appropri a voided check for this purpose. I furt an authorized person no longer desire understand that if corrections to my a non-payment due to insufficient funds manner as an insufficient funds check authorization is non-negotiable and negotiable.	ate on or up to 5 days prior to the her understand that this authorizates this service, allowing LPHA reaccount are necessary, they will be in my account will be processed and that I may be charged insu	e monthly due date of my ation is in effect until LPH, asonable time to act upon e reflected on the next bil by my financial institution	account. I have included A is notified that I or my notification. I also ling. I understand that and LPHA in the same
Signature*	Date		
*person shown on billing account			