Hawthorne Management Company, Inc.
Auto Debit Payment Form

Hawthorne Management Company offers a payment option that will automatically debit your bank account for your homeowner association assessments on the 5th business day of the month in which your association dues are payable. The association debit will be the same amount each billing month. The amount of debit will only change, if and when, your homeowner association dues change. We will only offer this payment plan to homeowners who are current with their dues.

To activate this automatic debit plan, **complete this form** and **send a voided check to:**
Hawthorne Management Company Attn: Accounts Receivable, P.O. Box 11906, Charlotte, NC 28220-1906.

Please continue to send your payments to Hawthorne Management Company until you are notified by email of the effective date of your first automatic draft payment.

If you have any questions, please feel free to contact our Accounts Receivable Dept. at 704-377-0114 or fax this form to 704-347-4475.

I authorize Hawthorne Management Company, Inc., as managing agent for the _____ Association, Inc., to automatically debit my

[__] checking [__] savings account.

Bank Account # _____
Routing Number _____
Financial Institution _____
City _____ State _____ Zip _____

Staple voided check here

I understand that this authorization will be in effect until I notify Hawthorne Management Company in writing that I no longer desire this service, allowing it reasonable time to act on my notification. I also understand that if corrections in the debit amount are necessary, it may involve an adjustment (credit or debit) to my account.

I have the right to stop payment of a debit entry by notifying Hawthorne Management Company before the account is charged. If an erroneous debit entry is charged against my account, I have the right to have the amount of the entry credited to my account by Hawthorne Management Company, if within 15 calendar days following the date on which I was sent a statement of account or a written notice of such entry of 45 days after posting, whichever occurs first, I give my financial institution a written notice identifying the entry, stating that it is in error and requesting credit back to my bank account.

THIS AUTHORIZATION IS NONNEGOTIABLE AND NONTRANSFERABLE

Customer Name _____

Property Address _____

Phone _____ E-mail _____

Association Name _____

Signature _____ Date _____