

Pre-Authorized Debit Plan

Please email to info@riverwestrealty.ca or fax to (604)271-0224

- 1. I/We hereby authorize Riverwest Realty Inc. (Riverwest) on behalf of our Strata Corporation to debit my/our account on the first of each month, an amount equal to the Assessment due by the undersigned's Strata Lot to the Strata Corporation. This amount may be increased or decreased as required to reflect my/our monthly Assessment as established by the Strata Corporation from time to time.
- 2. The account that Riverwest is authorized to draw upon is indicated below and a specimen cheque marked "VOID" has been attached to the reverse side of this authorization.

 Name of Financial Institution_____

 Branch Address ______

 Account # ______

- 3. I/We acknowledge that the above financial institution is not required to verify that the debit has been issued in accordance with the particulars of the authorization including amount and frequency of payments. I/We acknowledge that the above financial institution is not required to verify that any purpose of payment for which the debit was issued has been fulfilled by Riverwest as a condition to honouring a pre-authorized debit issued or caused to be issued by Riverwest on my/our account.
- 4. I/We undertake to inform Riverwest immediately in writing of any change in the account or other information provided in this authorization **FIVE BUSINESS DAYS** prior to the next due date of the pre-authorized debit. If the account is transferred to another financial institution, this authorization becomes null and void on the date of the transfer and it will be necessary to provide a new authorization to Riverwest.
- 5. I/We acknowledge that in order to completely revoke this authorization, I/We must provide and deliver written notice of revocation to Riverwest. This authorization may be cancelled at any time upon 30 days written notice by me/us to Riverwest. Revocation of this authorization does not terminate any contract for goods or services that exists between me/us and Riverwest. The payer's authorization applies only to the method of payment and does not have any bearing on the contract for goods and services exchanged.
- I/We acknowledge that delivery of this authorization to Riverwest constitutes delivery by me/us to the above financial institution.
 Any delivery of this authorization to you constitutes deliver by me/us.
- 7. I/We warrant that all persons whose signatures are required to sign on the account have signed this agreement below.
- 8. I/We understand and accept participation in this Pre-Authorized Debit Plan and acknowledge receipt of a copy of this authorization.

Surname and First Name		_ Date	_Strata Plan
Address		_Phone #	Strata Lot #
PAD Amount	Start Date		
Signature	Signature		