OWNERS ASSOCIATION of HARMONY®

200, 37 Quarry Park Blvd SE
Calgary, AB T2C 5H9
403-255-5374
admin@harmonyowners.com
www.harmonyowners.com

Customer Information

Name:

Street Address:

City: Province: Postal Code:

Phone Number: Email:

Pre-Authorized Debit (PAD) Details

I/we authorize the Owners Association of Harmony to deduct monthly recurring payments and/or occasional one-time payments for all charges arising under my/our Owners Association of Harmony account.

Regular monthly dues will be debited from my/our specified account on the first business day of each month. Changes to the monthly recurring amount will be communicated with at least 15 days' written notice. Authorization will be obtained for any additional one-time or sporadic debits.

In the event of three returned payments, I/we agree to forfeit the right to remain on a Pre-Authorized Debit (PAD) plan. Membership dues must then be paid in full within 15 days of receiving written notice.

Electronic notifications, invoices, or communications regarding my/our account may be sent by the Owners Association of Harmony. This authorization remains effective until written notice of changes or termination is provided by me/us, sent to **admin@harmonyowners.com** at least 10 business days before the next scheduled debit.

I/we have certain recourse rights if any debit does not comply with this agreement. I/we have the right to receive reimbursement for any PAD that is not authorized or is not consistent with this PAD agreement.

Signature of Account Holder:

Signature of Joint Account Holder (if applicable):

Name (Please Print):

Name (Please Print):

Date:

Date:

Banking Information

Bank Account Number: Transit Number:

Financial Institution Number: Chequing Account Savings Account

Financial Institution Name:

Branch Address:

When this form is complete, please email with a copy of a VOID CHEQUE to admin@harmonyowners.com