

# PRE-AUTHORIZED PAYMENT – CLIENT

**CONDEX PROPERTY MANAGEMENT LTD**

210-2695 Granville Street, Vancouver, BC V6H 3H4

Tel: 604-682-5611 Fax: 604-682-5614 email: [info@condex.ca](mailto:info@condex.ca)

**FOR ACCOUNTING USE ONLY:**

Date Recorded: \_\_\_\_\_

Strata Account #: (210) \_\_\_\_\_

STRATA PLAN \_\_\_\_\_

SUITE #: \_\_\_\_\_

I/We authorize the VanCity Credit Union to debit my/our account as indicated below for the amount of \$\_\_\_\_\_ (X) Monthly Maintenance commencing \_\_\_\_\_. This authorization may be cancelled at any time by written notice by me/us. Annual adjustment, in accordance with budget adopted, is authorized.

DATE: \_\_\_\_\_

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*NAME - PLEASE PRINT*

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*NAME - PLEASE PRINT*

*Telephone no.* \_\_\_\_\_

**FINANCIAL INSTITUTION:** \_\_\_\_\_

**BRANCH ADDRESS:** \_\_\_\_\_

\_\_\_\_\_

**YOU MUST ENCLOSE  
A SAMPLE CHEQUE  
MARKED VOID**

## ***Terms and Conditions***

### ***Valid Signing Authority***

I (we) warrant that all persons whose signatures are required to sign on this account have signed this agreement.

### ***Cancellation of Agreement***

I (we) acknowledge that, in order to revoke this authorization, I (we) must provide and deliver written notice of revocation to Condex Property Management Ltd. This authorization may be cancelled by me (us) upon 15 days notice prior to the next due date of the debit to allow for processing by Vancouver City Savings prior to the due date.

### ***Acceptance of Delivery of Authorization***

I (we) acknowledge that provision and delivery of this authorization constitutes delivery by me (us) to the aforementioned financial institution. Any delivery of this authorization to you constitutes delivery by me (us).

### ***Validation of Financial Institution***

I (we) acknowledge that the aforementioned financial institution is not required to verify that the debit has been issued in accordance with the particulars of the authorization including the amount and frequency of payments.

I (we) acknowledge that the aforementioned financial institution is not required to verify that any purpose of payment for which the debit was issued has been fulfilled by Condex Property Management Ltd. as a condition to honouring a pre-authorized debit on my (our) account.

### ***Contract for Goods/Services***

Revocation of this authorization does not terminate any liability for maintenance assessment fees that exists between me (us) and Strata Plan noted. My (our) authorization applies only to the method of payment and does not have any bearing on my (our) liability for maintenance fees.

### ***Change of Account Information***

I (we) undertake to inform Condex Property Management Ltd., in writing, of any change in the account information provided in this authorization 15 days prior to the next due date of the debit.

### ***Rights of Dispute***

Disputed items will be reimbursed subject to notification by me (us) to the branch of account within 90 days under any of the following conditions:

- a) I (we) never provided the authorization to debit my (our) account.
- b) The pre-authorized debit was not drawn in accordance with this authorization.
- c) My (our) authorization was revoked in accordance with the preceding conditions.
- d) The debit was posted to the wrong account due to invalid/incorrect account information.

I (we) understand that a written declaration to this effect must be given to my (our) financial institution.