

Bank Transfer Authorization For



I authorize **Sage HOA Services** to electronically debit my bank account according to the authorized rules and regulations of my HOA for my monthly HOA fee. I acknowledge that electronic debits against my account must comply with United States law.

Customer bank account information:

Routing Number: _____

Account Number: _____

Account type (circle one): Checking Savings

This payment authorization is to remain in effect until I, _____, notify Sage HOA Services of its cancellation by giving written notice in enough time for the business and receiving financial institution to have a reasonable opportunity to act on it.

Signed

Print Name

Date

Email Address

Phone Number

____ Hillsborough Villas Association ____
HOA

Email or Mail completed form to
hillsboroughvillashoa@sagehoaservices.com

OR mail to
Hillsborough Villas HOA
12335 Gold St
Omaha NE 68144