



PRE-AUTHORIZED BUSINESS DEBIT AGREEMENT (STRATA)

NAME OF OWNER(S) _____

BUILDING NAME _____ STRATA PLAN # _____

BUILDING ADDRESS _____

UNIT # _____ STRATA LOT # _____ TELEPHONE _____ EMAIL _____

I/We have read and agree to the conditions of this agreement. I/We authorize the strata corporation agent **Pacific Quorum (Okanagan) Properties Inc.** and the financial institution designated (void cheque or account information form attached) to begin deductions from **the first day of** (month/year) _____ / _____ for monthly recurring charges as follows:

****Note: Conditions regarding debit timing and amounts noted below.***

STRATA FEES: \$ _____ PARKING (if applicable) \$ _____

SIGNATURE(S) OF ACCOUNT HOLDER(S) _____

NAME OF ACCOUNT HOLDER (IF DIFFERENT FROM NAME OF OWNER(S)) _____

DATE SUBMITTED _____ [DATE RECEIVED _____]

CONDITIONS OF PRE-AUTHORIZED DEBIT (P.A.D.) AGREEMENT

TIMING: All debits are processed on the first day of each month for payments due for the current month. Agreements must be received by the 24th day of the preceding month (or the last working day before the 24th if that day falls on a weekend or holiday) to be processed for the following month. Agreements received after the 24th will be activated the following month. Fees due will be adjusted to include payments for the month of receipt as well as fees due effective on the first day of the following month.

INCREASES: Annual increases in strata fees and/or parking fees are deemed authorized by this agreement. Pre-notification of such increases are first proposed in writing at least 10 days before implementation and subsequently ratified at a general meeting of the strata owners before any adjustments are made to the P.A.D. amounts authorized at the inception of this agreement.

CANCELLATION: This agreement is automatically cancelled upon receipt of notification, at least 10 business days before the next P.A.D. due date, of sale or transfer of title that is effective in the month of notification and not more than 30 days from the date of notification. Further information on the right to cancel can be obtained from any financial institution or by visiting www.cdnpay.ca

RECOURSE RIGHTS: You have certain recourse rights if any debit does not comply with this Agreement. For example, you have the right to receive reimbursement for any debit that is not authorized or is not consistent with this P.A.D. Agreement. To obtain more information on your recourse rights you may contact your financial institution or visit www.cdnpay.ca

SPECIAL ASSESSMENTS: This form does not authorize the withdrawal of special assessment payments. Please complete the Pre-Authorized Business Debit Adjustment Form found at www.pacificquorum.com for payment of special assessments.

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Salmon Arm, BC V1E 4H7
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SICAMOUS
1B - 217 Finlayson Street
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Phone: 250-836-3840 Fax: 1-877-862-5700