

# SurePay

## Authorization Form

I authorize Hawaiiana Management Company, Ltd., as Agent for my association, to begin deductions from my account with the financial institution named below for payment of my association charges.

I also agree to payment of any handling fee charged for SurePay payment that cannot be processed due to insufficient funds, stop payment or account closure.

If I wish to terminate my SurePay payment, I understand that I must send a letter of notification to Hawaiiana Management Company, Ltd., and that notification must be received by Hawaiiana at least 15 days prior to my next scheduled SurePay payment; otherwise termination will take place beginning with the following payment.

If Hawaiiana Management Company, Ltd. wishes to terminate SurePay service, the company will send a letter of notification to me. This letter will be mailed 20 days prior to the next SurePay payment for the termination to be effective.

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

Association: \_\_\_\_\_

Unit Number: \_\_\_\_\_

Phone #: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Hawaiiana Account Number: \_\_\_\_\_

My Financial Institution: \_\_\_\_\_

9-Digit Routing Number: \_\_\_\_\_

My Account Number: \_\_\_\_\_

Type of Account:  Checking  Savings

Authorized Signature

Account Holders Name (please print)

**Please attach a voided check from your financial institution for verification. If the form is received by the 15<sup>th</sup>, SurePay will go into effect on or around the 10<sup>th</sup> of the following month\*.**

# SurePay

## Maintenance Fee Deduction

**(PLEASE KEEP THIS SECTION FOR YOUR RECORDS)**

On \_\_\_\_\_, I authorized Hawaiiana Management Company, Ltd., to initiate electronic funds transfer from my financial institution account on or about the 10<sup>th</sup> of each month\* to pay my association charges for my unit.

Association Name: \_\_\_\_\_

Unit Number: \_\_\_\_\_

Financial Institution: \_\_\_\_\_

Type of Account:  Checking  Savings

Account Number: \_\_\_\_\_

### NOTES:

If you wish to terminate SurePay payment, send a letter of notification to:

**Hawaiiana Management Company, Ltd.  
Attention: SurePay  
711 Kapiolani Boulevard, Suite 700  
Honolulu, Hawaii 96813**

Your letter must be received 15 days in advance of the next SurePay payment and include your phone number and original signature for the termination to be effective.

If Hawaiiana Management Company, Ltd. wishes to terminate SurePay service, we will mail a letter of notification to you 20 days in advance of the next SurePay payment.

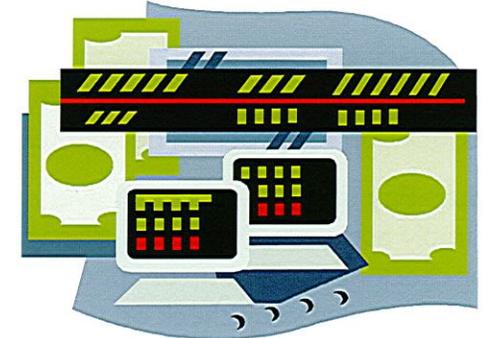
If you have any questions regarding your bank statement, please call your financial institution. If you have any questions regarding SurePay, please call us at 593-6830 and ask for the Assistant Controller.

Please keep Hawaiiana apprised, **in writing**, of any change of address or account information. Be sure to include your phone number, account number and original signature on all correspondence.

\*NOTE: If the 10<sup>th</sup> falls on a Saturday, your payment will be deducted on the 9<sup>th</sup>. If the 10<sup>th</sup> falls on a Sunday or holiday, your payment will be deducted on the next business day.

# SurePay

## Automatic Payment Service for your Association Charges



### **SurePay Advantages:**

- **No checks to write!**
- **No postage to pay!**
- **No chance of late fees!**



**Hawaiiana Management Company, Ltd.  
711 Kapiolani Boulevard, Suite 700  
Honolulu, Hawaii 96813  
Ph: 593-9100 Fax: 593-6333  
www.hmcmgt.com**

## Discover the convenience of **SurePay** Automatic Payment of Association Fees

**SurePay** offers an easy approach to paying association charges through any participating local or mainland bank, credit union or savings & loan.

**Tired of remembering to send your association fees?** Want to **save postage** and **avoid late charges?** Then it's time for **SurePay**, the automatic association fee program being offered by Hawaiiana Management Company, Ltd.

**SurePay** is easy, and almost every financial institution in the United States participates. Simply authorize Hawaiiana Management Company, Ltd., to directly debit your savings or checking account on or about the tenth of every month\*, and you'll never worry again about mailing your check on time.

Hawaiiana's **SurePay** is an automatic payment system that has been in use for many years. It's easy, reliable, and has been proven by many users including banks, utility companies and Hawaiiana itself.

If you decide later that you would prefer to pay your association charges directly, you can stop automatic payments by simply sending a letter to Hawaiiana stating your desire to terminate the service. (Please be sure to include your phone number in any correspondence for confirmation purposes.) The letter must be received **on** or **before** the 15th of a month to terminate service for the following month.

For **SurePay** convenience, simply complete the adjacent form, detach and return it today! Retain the informational portion for your files.

\*PLEASE NOTE: If the 10th falls on a Saturday, your payment will be deducted on the 9th of the month. If the 10th falls on a Sunday or holiday, your payment will be deducted on the next business day.

(KEEP THIS PART FOR YOUR RECORDS)

# SurePay

## Instructions

*This brochure has two parts. One part is the Authorization Form and the second part is an informational section, which you should keep for your records.*

**First:** Complete the Authorization Form and cut it off along the dotted line.

**Second:** Please make sure that you have written your account number correctly on the form. If you are using your checking account, please attach a voided check with your form.

**Third:** Mail the completed form and voided check to the following address.

### Mail Authorization Form to:

**Hawaiiana Management Company, Ltd.**  
**Attention: SurePay**  
**711 Kapiolani Boulevard, Suite 700**  
**Honolulu, Hawaii 96813**

**Fourth:** Be sure to keep Hawaiiana apprised of any changes to your mailing address.

Please review your bank statement for your first SurePay payment. If we receive your completed form by the 15<sup>th</sup> of a month, SurePay will be effective the following month.

If you have any questions, please call 593-6830 and ask for the Assistant Controller.