



Asset Property Management, Inc. (APMI) has entered into an agreement with Bank of Hawaii, the State's largest bank, whereby owners of Ho'olei apartments will be offered the opportunity to pay their Association maintenance fees an easy convenient way; automatically.

Here's how it works: you will fill out this simple form authorizing APMI/Ho'olei Association of Apartment Owners (AOAO) to pay the monthly Association fees from your checking or savings account located anywhere in the United States. It is as simple as that. You can forget about writing checks, buying postage stamps, running to the mailbox, and no more late fees. There is no charge to your account for the SurePay payment service; however your account is still subject to charges for rejected/return items. APMI reserves the right to cancel the SurePay service on any owner whose account rejects more than one item each year or for other reasons.

Your SurePay automatic payment will be made in the first week of the month, and will start 15 to 45 days after we receive your SurePay authorization form at APMI. An authorization form is printed on the bottom of this page. Simply fill in the blanks and return to Ho'olei AOAO C/O APMI, at the address listed below.

The SurePay service is available through most accounts at banks, savings and loan, or credit union in the United States that is a member of the Automated Clearing House (ACH) Association.

**AUTHORIZATION For
SurePay Automatic Payment service (ACH Debits)**

I authorize APMI to set up a SurePay Automatic Payment Service for me and to initiate transfers (ACH debits) to pay the charges for the owner/member named below.

Unit Owner Name _____ **Phone #** (_____) _____ - _____

The Ho'olei Association of Apartment Owners, Unit # _____

I also authorize the financial institution named below to accept the (ACH) transfers and charge my checking or savings account shown below to pay the Project charges.

Your Financial Institution _____
(Name)

Branch _____ **Address** _____
(Name) (Number & Street) (City, State & Zip)

Account Type: Checking (Attach Voided Check) **Savings** Savings Account # _____

This authorization is to remain in full force and effect until APMI has received written notification from me (or either of us) of its termination in such time and in such manner as to afford COMPANY and DEPOSITORY a reasonable opportunity to act on it.

Signed _____ **Date** _____
Signature must be the same as you sign checks.

Please attach a voided check (or include savings account number) for the account shown and mail to:

**Asset Property Management, Inc.
369 Huku Li'i Place, Suite 202
Kihei, HI 96753**