

For Sandcastle use ONLY

Acct. # _____



CONTACT INFORMATION / ACH AUTHORIZATION FORM

We need your assistance updating our records by completing this form and returning it to our office. The information provided will be used solely by Sandcastle Management, LLC for the specific purpose of processing payments to the association as they become due. Please print clearly.

Your Association Name: _____

Owner Name(s): _____

Owner Property Address: _____

Mailing Address: ___ Same as above Or _____

For all future correspondence, please let our office know each time you wish to change your mailing address, so that we can send Association information to the correct address.

Phone number(s): _____

E-mail(s): _____

Home Watch: _____ Phone: _____

Preferred Statement method (choose one): ___ Paper Statement ___ E-Statement ___ None (Automatic ACH)

**If your association's assessments are billed monthly, a coupon booklet will be sent at the end of the year, or you can elect e-Statements instead.
A statement or e-statement WILL NOT be sent for those enrolled in ACH. If you need a statement or e-statement for your records, please contact us.

To make payments electronically, please go to www.sandcastlecm.com

To enroll in Automatic ACH, please complete the following information:

I authorize Sandcastle to direct debit ACH for my current budgeted Association fees.

Please print clearly or attach a copy of a voided check or document from the Bank. At this time, we can only draft from a U.S. account.

Routing Number: _____ Account number: _____

Indicate account type: Checking ___ Savings ___

Month to start direct debit: Next Assessment Due ___ or Other future assessment _____

I understand this authorization is for the current adopted budget assessments only. Any additional charges or fees will not be included and must be paid separately. I understand that the auto debit ACH will appear on my bank statement within 10 days after the due date with the description of the Association. Further, this auto debit will remain in effect unless I notify Sandcastle in writing 30 days prior to cancelling.

Signature _____ Date _____

This form may be emailed to billing@sandcastlecm.com