

**The Villas at Ranch Reserve HOA  
14901 E Hampden Ave Suite 120  
Aurora, CO 80014  
(303) 693-2118 (303) 693-8803 Fax**

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

**Property Address:** \_\_\_\_\_

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City, State, ZIP:** \_\_\_\_\_

### **Authorization for Direct Withdrawal of Association Dues**

The undersigned, as owner of the above mentioned property, hereby authorizes Cherry Creek HOA Professionals, LLC, or its representative, as managing agent for The Villas at Ranch Reserve HOA, to initiate a withdrawal from my checking account to pay homeowner assessments each month. The withdrawal will become effective on the 5<sup>th</sup> day of each month, or the next business day if the 5<sup>th</sup> falls on a weekend or holiday. The amount of the withdrawal will be the current monthly assessment rate for The Villas at Ranch Reserve HOA, plus any past due amounts showing on my account.

The withdrawal will first be made on the 5<sup>th</sup> day of the month following receipt of this letter by the managing agent and will continue on a monthly basis until a written notice of cancellation is received by Cherry Creek HOA Professionals, LLC, as managing agent for the Association.

\_\_\_\_\_  
**Authorized Signature**

\_\_\_\_\_  
**Date**

**Attach a voided check to this form.**