

Please complete the Pre-Authorized Debit (PAD) Plan agreement below

MUST BE RECEIVED BY MANAGEMENT OFFICE 7 BUSINESS DAYS PRIOR TO FIRST OF THE MONTH

I/We authorize **Durham Common Elements Condominium Corporation # 292** (292), by its agent T.S.E. Management Services Inc., and the financial institution designated (or any other financial institution I/We may authorize at any time) to begin deductions as per my/our instructions for monthly regular recurring payments and/or one time payments from time to time, for payment of all fees arising from my ownership of a freehold unit attached to 292 as approved by the board of directors. Regular monthly payments for the full amount of fees and/or one time payment of other fees will be debited to my/our specified account on the first day of each month.

This authority is to remain in effect until 292 has received written notification from me/us of its change or termination. This notification must be received at least ten (10) business days before the next debit is scheduled at the address provided below. I/We may obtain a sample cancellation form or more information on my/our right to cancel a PAD Agreement at my/our financial institution or by visiting www.cdnpay.ca

292 may not assign this authorization, whether directly or indirectly, by operation of law, change of control or otherwise without providing at least ten days of prior written notice to me/us.

I/We have certain recourse rights if any debit does not comply with this agreement. For example, I/We have the right to receive reimbursement for any PAD that is not authorized or is not consistent with this PAD Agreement. To obtain a form for a Reimbursement Claim, or for more information on my/our recourse rights, I/we may contact my/our financial institution or visit www.cdnpay.ca

PLEASE ATTACH A SAMPLE CHEQUE WITH "VOID" WRITTEN ON IT.

Owners Name(s): _____

Unit #: _____ Cornerside Way, Durham, Ontario

Monthly fees: \$ _____ Start Date: _____

Name of Financial Institution (FI): _____

FI Account #: _____ FI Bank #: _____ (3 digits) FI Transit #: _____ (5 digits)

FI Address: _____

City/Town: _____ Province: _____ Postal Code: _____

Authorized Signature(s): _____

Date: _____ Phone: _____ Email: _____

CONTACT INFORMATION:

Durham Common Elements Condominium Corporation # 292

Attention: Accounts Receivable
c/o 30 East Beaver Creek Road, Suite # 107
Richmond Hill, Ontario, L4B 1J2
Tel: 905.764.9166
Fax: 905.882.0228
E-mail: tse@tsems.com