





#### 4. Pre-Authorized Debit (PAD) Details

I/We authorize Newport Mews Strata VR1191 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 charges arising under my/our Newport Mews Strata VR1191 account(s). Regular monthly payments for the full amount of services delivered will be debited to my/our specified account on the 1st day of each month. These services are for Strata Maintenance Fees.

These services are for (check one)  personal or  business purposes.

Newport Mews Strata VR1191 will obtain my/our authorization for any other one-time or sporadic debits and provide me with 10 calendar days written notice prior to any debits. This authority is to remain in effect until Newport Mews Strata VR1191 has received written notification from me/us of its change or termination. This notification must be received at least thirty 30 calendar 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](http://www.cdnpay.ca).

In the case of variable amount PADs, Newport Mews Strata VR1191 will provide 10 days written notice prior to any changes in the fees and/or its schedule.

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](http://www.cdnpay.ca)

I/We understand and accept the terms of participating in this PAD plan.

\_\_\_\_\_  
Signature of Account Holder

\_\_\_\_\_  
Signature of Joint Account Holder (if appropriate)

\_\_\_\_\_  
Name (Please print)

\_\_\_\_\_  
Name (Please print)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

When the form is complete, submit to:

Newport Mews Strata VR1191  
c/o 21-1870 Yew Street  
Vancouver, BC V6K 3G2  
[accounting@npmews.com](mailto:accounting@npmews.com) or [rod@npmews.com](mailto:rod@npmews.com)  
Phone/Fax: 604 736-5050