



HIDE-A-WAY LAKE CLUB, INC.

P.O. Box 1011

PICAYUNE, MISSISSIPPI 39466-1011

Phone: 601-798-1484

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Fax: 601-798-0604

Email address: office@hawlms.net

ACH Authorization Form

Automatic/Manual Online Payments Will Make Your Life Easier! It's convenient and will help save you time and postage. Also, you will have the added benefit of automatically receiving your bill by email instead of a physical copy being mailed.

Automatic Payments:

By selecting the "Automatic Payments" option, you authorize HAWL to make monthly charges to your checking or savings account on one of the dates you choose (see optional dates below). **Only the current amount (1 – 30 days) will be drafted; no past due amount will be withdrawn.** You will receive no notification prior to the payment being collected since you have chosen the withdrawal date. By selecting this option, HAWL will assign a password to you. Using this password, sign in to HAWL's website (www.hawlms.com) and click on the "Customer Account Center" to see the status of your account. Additionally, you have the option to submit additional payments to your account before receiving your bill. Once you have used the HAWL password, you will be able to replace it with a password of your choosing.

Manual Payments:

By selecting the "Manual Payments" option, HAWL will assign a password to you. Using this password, you can simply sign in to HAWL's website (www.hawlms.com) and click on the "Customer Account Center" to see your amount due and submit payment for your account. During the month, the payment can be made on any date of your choosing prior to the 25th. Once you have used the HAWL password, you will be able to replace it with a password of your choosing.

*Please note, automatic/manual payments will appear on your bank statement as an "ACH Debit."

Please complete the information below. Note: Property owners of multiple lots must submit one form for each lot.

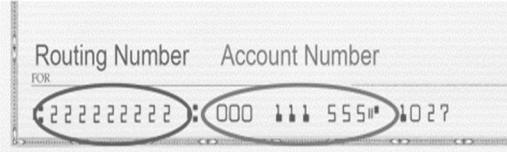
Lot #: _____ Email Address: _____ Phone #: _____

I authorize Hide-A-Way Lake Club, Inc. to charge my bank account indicated below for payment of the Hide-A-Way Lake Club, Inc. bill for the lot number indicated above.

I would like to sign up for:

☐ **Automatic Payments** – which will be processed on one of four dates: ☐ 1st ☐ 9th ☐ 17th or ☐ 25th of each month (please select **only one** date).

☐ **Manual Payments** – which will be processed the next business day following a self-initiated online payment.

Account Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings	
Bank Name _____	
Transit Routing # _____	
Bank Account # _____	

Please attach a voided CHECK or SAVINGS DEPOSIT SLIP for routing number and account number verification. (A deposit slip for a checking account is not valid.)

SIGNATURE _____ **DATE** _____

I understand that this authorization will remain in effect until I cancel it in writing. I agree to notify Hide-A-Way Lake Club, Inc. in writing of any changes in my account information or termination of this authorization in such time to afford reasonable opportunity to act on it. If the above noted periodic payment dates fall on a weekend or holiday, I understand that the payment may be executed on the next business day. I understand that because this is an electronic transaction, these funds may be withdrawn from my account as soon as the above noted periodic transaction dates. In the case the ACH Transaction is rejected for Non-Sufficient Funds (NSF), I understand that I must either initiate an online "Manual Payment" or provide a physical check for payment. I acknowledge that the origination of ACH transactions to my account must comply with the provisions of U.S. law. I agree not to dispute this electronic debit with my bank so long as the transactions correspond to the terms indicated in this authorization form. I also authorize Hide-A-Way Lake Club, Inc. to credit my bank account, if necessary, for a correction.

Office Use Only (initial and date):

GP Updated with bank information.

Updated email in GP. (If customer does not have email, update "no email" list and inform bookkeeper.)

Web Password is _____ **And** _____ Issued to Customer in person **or** _____ letter mailed on _____

Web Updated

ACH Deleted: Date Deleted and Employee Initial: _____ (Stamp form as deleted. Form must be kept in PO file for two years.)

NOTES:

Revised: 02/26/25