



Welcome to Hot Springs Village!

We are so excited to have you as a new neighbor! To help make the “business” of becoming a member of our community a little easier, we have designed this packet to help get things started.

Enclosed are several forms that will need to be completed prior to setting up an appointment with a member of our team. Please complete the new member information sheet and vehicle registration form prior to your visit. If you would like to setup your assessment or utility payment on our auto draft program, those forms are also included. Along with these forms you will also need to bring a copy of your settlement (closing) statement, warranty deed and photo ID to your appointment.

To setup an appointment to meet with a member of our team call 501-922-5556 or email us at customerservice@hsvpoa.org. During this appointment we will get your information setup in our system, and provide you with member ID or gate cards, vehicle decals and any amenity passes or registrations for boats, pets, etc.. Gate cards are \$15 per person, ID cards are \$10 and your vehicle decals are \$10 each.

We know you have many questions. Our team is happy to assist you in answering each and every one of them. During your appointment with us, we will have additional resources for you that will provide answers to many of those questions. We are always available to answer any additional questions you may have.

We look forward to meeting with you soon,

Your Member Services Team



NEW MEMBER INFORMATION SHEET

Member Name (Primary): _____

Telephone: _____ **Mobile Phone:** _____

Email Address: _____

Member Name (Secondary): _____

Telephone: _____ **Mobile Phone:** _____

Email Address: _____

Property Address: _____

Lot/Block/Addition (Provided by POA): _____

Billing Address: _____

Would you like Automatic Draft for Assessments? YES NO

Would you like Automatic Draft for Utilities? YES NO

How did you discover HSV?: Family Friends Internet Other: _____

What was your prior City, State?: _____



**VEHICLE REGISTRATION
(NEW OR RENEWAL)**

Member Name (Primary): _____

Member Number: _____

Lot/Block/Addition: _____

Telephone: _____ Mobile Phone: _____

Email Address: _____

Address: _____

City/State/Zip: _____

<i>STATE / LICENSE PLATE NO.</i>	<i>YEAR OF CAR</i>	<i>MAKE/MODEL/COLOR</i>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Signature: _____

Date: _____



Authorization for Automated Assessment Payment

Primary Member Name _____ Member ID _____

Lot/Block/Addition _____ Property Address _____

Telephone _____ Email Address _____

Bank Account Information

Financial Institution Name _____

Checking Account Number _____

Bank Routing (ABA) Number _____

*****Please attached a voided check (no deposit slips) to ensure accurate processing *****

Choose Draft Below

Assessment accounts must have a zero balance at the starting date of your selected draft. Applications must be received by the 15th of the month prior to the draft start date.

Unimproved Property

_____ Monthly (drafted the 1st business day of each month) \$39.97 (2021 Rates)

_____ Quarterly (drafted the 1st business day of each quarter) \$119.91 (2021 Rates)

_____ Annually (drafted the 1st business day of the year) \$479.64 (2021 Rates)

Improved Property

_____ Monthly (drafted the 1st business day of each month) \$69.26 (2021 Rates)

_____ Quarterly (drafted the 1st business day of each quarter) \$207.78 (2021 Rates)

_____ Annually (drafted the 1st business day of the year) \$831.12 (2021 Rates)

I _____ hereby authorize the Hot Springs Village Property Owners Association to initiate debit entries to my account listed above at the depository financial institution named above, and to debit the same to such account. I acknowledge that the origination of ACH transactions to my account must comply with provisions of U.S. law.

I understand that assessment amounts may increase, as approved by the Board of Directors or by vote of the membership, and that this authorization covers any approved assessment increases. This authorization is to remain in full force and effect until Hot Springs Village POA has received written notification to terminate. Notification of termination must be received by the 15th of the month prior, in order to be terminated by the next draft date.

The Hot Springs Village POA may assess a service charge for any automatic withdrawal returned for any reason. I understand that it is my responsibility to notify the HSVPOA of any account changes.

Signature of Account Holder: _____ Date: _____





AUTHORIZATION FOR AUTOMATED UTILITY PAYMENTS

Member Name (Primary): _____

Utility Account Number: _____

Lot/Block/Addition: _____

Telephone: _____ Mobile Phone: _____

Email Address: _____

Address: _____

City/State/Zip: _____

Bank Account Information:

Financial Institution Name: _____

Checking Account Number: _____

Bank Routing (ABA) Number: _____

*****Please attach a voided check (no deposit slips) to ensure accurate processing*****

Your Utility account must have a zero balance at the starting date of your selected draft. Your application must be returned one billing cycle prior to the date your draft is able to start. You will continue to receive your Utility Bill prior to the payment / draft date. If you have any questions, please call 501-922-5520 or email ctaylor@hsvpoa.org prior to the payment / draft date.

I authorize HSV POA to charge my checking account as I have indicated above. This authorization is to remain in full force and effect until Hot Springs Village Property Owners' Association has received written notification to terminate. Written notification to terminate must also be received by the 15th of the month in order to terminate by the next draft date.

You may mail this form to Hot Springs Village Property Owners Association at 895 DeSoto Blvd., Hot Springs Village, AR 71909 or bring to the office at the same address between 8:00 a.m. and 4:30 p.m. Monday – Friday.

Signature: _____

Date: _____