



AUTHORIZATION AGREEMENT FOR DIRECT PAYMENT (ACH DEPOSITS)

HOMEOWNERS ASSOCIATION _____ LOT# _____

I (we) hereby authorize AMCOR PROPERTY PROFESSIONALS, INC. hereinafter called COMPANY, on behalf of the above named association, to initiate debit entries to my (our) checking account indicated below at the depository named below, hereinafter called DEPOSITORY, to debit the same to such account. **These debit entries will take place on the 10th of each respective month.** (If the date lands on a weekend, the debit will be taken on either that Friday or Monday, whichever is closest.)

BANK NAME _____

CITY _____ STATE _____ ZIP _____

ROUTING NUMBER _____ ACCOUNT NO. _____
(From Check) (From Check)

This authorization is to remain in full force and effective until COMPANY has received notification from me (or either of us) of its termination in such time and in such manner as to afford COMPANY and DEPOSITORY a reasonable opportunity to act on it. **I also give authority to adjust the charge as the Association's Board of Directors change the payment amount.**

NAME (S) _____
(Please Print)

DATE _____ SIGNATURE _____

NOTE: ALL WRITTEN DEBIT AUTHORIZATIONS MUST PROVIDE THAT THE RECEIVER MAY REVOKE THE AUTHORIZATION ONLY BY NOTIFYING THE ORGINATOR IN THE MANNER SPECIFIED IN THE AUTHORIZATION.

PHONE # _____

ASSOCIATION FEES: \$ _____

***** INCLUDE COPY OF VOIDED CHECK *****

THANK YOU,

Denise Day

denise@amcorprop.com
DIRECTOR OF ACCOUNTING