

ACH Origination Agreement
Schedule E
Authorization Agreements
Direct Debit

AUTHORIZATION AGREEMENT FOR DIRECT PAYMENTS (ACH DEBITS)

PARKVIEW HOMEOWNERS ASSOCIATION
c/o Chastine Property Management, Inc.

I (we) hereby authorize The Park Downtown Property Owners' Association, hereinafter called COMPANY, to initiate debit entries to my (our) Checking Account / Savings Account (select one) indicated below at the depository financial institution named below, hereinafter called DEPOSITORY, and to debit the same to such account. I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of U.S. Law.

Your BANK Name: _____

Branch Location: _____

City: _____ State: _____ Zip: _____

Routing Number: _____

Account Number: _____

This authorization is to remain in full force and effect until COMPANY has received written 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.

Name: _____

Date: _____

Property Address: _____

Signature: _____

DRAFT TO BEGIN ON: _____

NOTE: ATTACH VOIDED CHECK HERE FROM YOUR CHECKING OR SAVINGS ACCOUNT
(Deposit slips are not acceptable)