

## **AUTHORIZATION AGREEMENT FOR DIRECT PAYMENTS (ACH DEBITS)**

Company Name: Brook Point Village II Condominium Association Company ID: 290 BPVII

I/we, hereby authorize the Brook Point Village II Condominium Association, hereafter referred to as "the Company," to initiate debit entries to my/our \_\_ Checking Account / \_\_\_\_Savings Account (select one) indicated below at the depository financial institution named below, hereafter referred to as "the Bank," 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 the United States Law.

Bank Name:	Branch:
City:	State: Zip:
Routing Number:	Account Number:

This authorization is to remain in full force and effect until the Company has received written notification from me/us of its termination in such time and in such manner as to afford the Company and the Bank a reasonable opportunity to act on it.

Unit Address:

Name(s): \_\_\_\_\_\_\_\_(Please print)

Signature(s): \_\_\_\_\_

(Please print)

Date:

Note: Debit authorizations must provide that the receiver may revoke the authorization only by notifying the originator in the specified manner in the authorization.