

PLEASE ATTACH A VOIDED CHECK AND RETURN TO

Courtyards HOA
601 Mason Dixon Road
Gettysburg, PA 17325

COURTYARDS HOA

*AUTHORIZATION AGREEMENT FOR DIRECT DEBITS
(Automated Clearing House – ACH DEBITS)*

COMPANY NAME: COURTYARDS HOA

I hereby authorize the Company identified above, hereinafter called the COMPANY, to initiate debit entries to my account at my financial institution named below, hereinafter called the DEPOSITORY, for the purpose, amount and frequency as indicated below:

NAME (as on bank account): _____

DEPOSITORY NAME: _____

DEPOSITORY CITY: _____ **STATE:** _____

ROUTING NUMBER (9 digits): _____

ACCOUNT TYPE (circle one): **CHECKING** **SAVINGS**

ACCOUNT NUMBER: _____

AMOUNT: \$ _____

FREQUENCY: Monthly

PURPOSE OF DEBIT: HOA dues

DATE: 3rd of each month
(on or about this date)

Furthermore:

- § *I have contacted my DEPOSITORY and verified that I have provided the correct Routing Number and Account Number and will update the COMPANY promptly should that information change in the future.*
- § *I am aware that Funds need to be available in my account and any charges to my account by my DEPOSITORY will not be the responsibility of the COMPANY.*
- § *I agree that correcting entries may be processed in the event of an error.*
I acknowledge that the origination of ACH transactions to my account must comply with the provisions of U.S. law.

This authorization is to remain in full force and effect until the COMPANY has received written authorization from me of termination of this agreement in such time and manner to afford COMPANY and my DEPOSITORY a reasonable opportunity to act.

DATE: _____

SIGNATURE: _____

PLEASE PROVIDE VOIDED CHECK.