## **AUTHORIZATION AGREEMENT FOR PREAUTHORIZED PAYMENTS**

## COMPANY NAME: **ECHO GLEN I CONDOMINIUMS**

I (we) hereby authorize <u>Echo Glen I Condominiums</u> hereinafter called COMPANY, to initiate debit entries of \$165.00 for my (our) Monthly Dues and a 30¢ bank charge, equaling \$165.30 to my (our) Financial Institution indicated below on the 10<sup>th</sup> of the month.

NAME OF FINANCIAL INSTITUTION	
FINANCIAL INSTITUTION ROUTING/TRAN	ISIT/ABA NUMBER
FINANCIAL INSTITUTION ACCOUNT NUM	BER
MONTH TO BEGIN DIRECT DEBIT	
This authorization is to remain in full force and enotification from me (or either of us) of its terminafford COMPANY and Financial Institution a result.	nation in such time and in such manner as to
Echo Glen I Property Address:	
Signature:	Date:
Name (Please Print):	
PLEASE REMIT VOIDED CHECK	

ORIGINATOR SPECIFIED IN THE AUTHORIZATION.