

**Regal Chateaux Condominium Association  
EPI Management Company, LLC  
Authorization Agreement for Automatic Withdrawals  
(ACH Debits)**

I (we) hereby authorize Regal Chateaux Condominium Association, herein after called PROPERTY, to initiate debit entries and to initiate, if necessary, credit entries and adjustments for any debit entries in error to my (our) Checking Account indicated on the attached check, hereinafter called DEPOSITORY, to debit and/or credit the same to such account.

**ATTACH VOIDED CHECK HERE**

This authorization is to remain in full force and effect until PROPERTY has received written Notification from me (or either of us) of its termination thirty (30) days in advance of the effective date of termination.

PRINT NAME: \_\_\_\_\_ SIGN NAME: \_\_\_\_\_

DATE: \_\_\_\_\_ TELEPHONE NUMBER: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ UNIT # \_\_\_\_\_

**Note that there will be a \$35 charge for any ACH transfer reversals due to insufficient funds in your account at the time of transfer. Transfers will occur between the 5<sup>th</sup> and 20<sup>th</sup> of each month.**

**We must receive your properly completed authorization form NO LATER THAN THE 15<sup>TH</sup> of the month prior to the effective date of the first transfer (i.e., form must be received by September 15<sup>th</sup> for the October assessment payment to be automatically withdrawn.)**

**PLEASE INDICATE THE MONTH YOU WANT YOUR FIRST PAYMENT TO BE MADE**

**FOR**

NEW APPLICATION: \_\_\_\_\_

BANK ACCOUNT CHANGE TO EXISTING ACH ACCOUNT: \_\_\_\_\_

Please return to:

**EPI Management Company, LLC  
14032 South Kostner Avenue, Suite M  
Crestwood, IL 60445**

TO BE COMPLETED BY EPI

EPI UNIT ID NUMBER: \_\_\_\_\_ MONTHLY ASSESSMENT: \_\_\_\_\_

\_\_\_\_\_ Admin \_\_\_\_\_ A/R \_\_\_\_\_ Accounting \_\_\_\_\_