## AUTHORIZATION AGREEMENT FOR PREAUTHORIZED PAYMENTS

## COMPANY NAME: OVERLOOK CONDOMINIUM

I (we) hereby authorize **Overlook Condominium** hereinafter called COMPANY, to initiate debit of \$320.00 for my (our) Monthly Dues and a 30¢ bank charge, equaling \$320.30 to my (our) Financial Institution indicated below on the 10<sup>th</sup> of the month.

our) Financial Institution indicated below on the 10<sup>th</sup> of the month.

NEW ENROLLMENT AMEND CURRENT INFORMATION

NAME OF FINANCIAL INSTITUTION

ACCOUNT NUMBER

**ROUTING NUMBER** 

DIRECT DEBIT START DATE

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 Financial Institution a reasonable opportunity to act on it.

Old Farm Property Address: Name (Please Print):

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## PLEASE REMIT VOIDED CHECK