## **AUTHORIZATION AGREEMENT FOR PREAUTHORIZED PAYMENTS**

## COMPANY NAME: LONGLEY GREEN ASSOCIATION, INC

I (we) hereby authorize <u>Longley Green Association</u>, <u>Inc.</u> hereinafter called COMPANY, to initiate debit entries of \$300.00 for my (our) Quarterly Dues and 30¢ bank charge, equaling \$300.30 to my (our) Financial Institution indicated below on the 10<sup>th</sup> of the quarter 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

NOTE: ALL WRITTEN DEBIT AUTHORIZATIONS MUST PROVIDE THAT THE RECEIVER MAY REVOKE THE AUTHORIZATION ONLY BY NOTIFYING THE ORIGINATOR

SPECIFIED IN THE AUTHORIZATION.