## **AUTHORIZATION AGREEMENT FOR PREAUTHORIZED PAYMENTS**

COMPANY NAME: OVERLOOK CONDOMINIUM

I (we) hereby authorize <u>Overlook Condominium</u> hereinafter called COMPANY, to initiate debit of \$377.00 for my (our) Monthly Dues and a 30¢ bank charge, equaling \$377.30 to my (our) Financial Institution indicated below on the 10<sup>th</sup> of the month.

NEW ENROLLMENT	AMEND CURRENT INFORMATION
NAME OF FINANCIAL INSTITUTIO	)N
ACCOUNT NUMBER	ROUTING NUMBER
DIRECT DEBIT START DATE	
This authorization is to remain in full fontification from me (or either of us) of	orce and effect until COMPANY has received written its termination in such time and in such manner as to ution a reasonable opportunity to act on it.
notification from me (or either of us) of afford COMPANY and Financial Institu	its termination in such time and in such manner as to
This authorization is to remain in full for notification from me (or either of us) of afford COMPANY and Financial Institution	Fits termination in such time and in such manner as to ution a reasonable opportunity to act on it.