## **AUTHORIZATION AGREEMENT FOR PREAUTHORIZED PAYMENTS**

COMPANY NAME: OVERLOOK CONDOMINIUM

I (we) hereby authorize <u>Overlook Condominium</u> hereinafter called COMPANY, to initiate debit of \$308.00 for my (our) Monthly Dues and a 30¢ bank charge, equaling \$308.30 to my (our) Financial Institution indicated below on the 10<sup>th</sup> of the month.

our) Financial Institution indicated below on the 10th of the month.	
NEW ENROLLMENT	AMEND CURRENT INFORMATION
NAME OF FINANCIAL INSTITUTION	N
ACCOUNT NUMBER	ROUTING NUMBER
DIRECT DEBIT START DATE	
notification from me (or either of us) of	rce and effect until COMPANY has received written its termination in such time and in such manner as to tion a reasonable opportunity to act on it.
Old Farm Property Address:	
Name (Please Print):	
Signature:	Date:
PLEASE REMIT VOIDED CHECK	