

# AUTHORIZATION AGREEMENT FOR PRE-AUTHORIZED PAYMENTS

## Section I

SP II Homeowners Association (herein referred to as "the Association")

I (we) hereby authorize the Association to initiate debit entries to my (our) checking account for monthly assessments. Indicated below is my (our) bank and bank account number to which said debit entries should be applied.

## Section II

### **Bank Account Information**

Bank Name \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

Account Holder(s) Name \_\_\_\_\_

Bank Routing Number \_\_\_\_\_

Bank Account Number \_\_\_\_\_

ACCOUNT HOLDER IS REQUIRED TO CALL THEIR FINANCIAL INSTITUTION TO VERIFY THAT ELECTRONIC DEBITS WILL USE THE SAME ACCOUNT NUMBER AND ROUTING TRANSIT NUMBER AS PROVIDED ON THE ACCOUNT HOLDER CHECK. IF THE FINANCIAL INSTITUTION USES A DIFFERENT ROUTING NUMBER FOR ELECTRONIC TRANSFERS, IT IS THE ACCOUNT HOLDER'S RESPONSIBILITY TO PROVIDE THAT INFORMATION ABOVE.

## Section III

### **Homeowner Information**

Print Name(s) \_\_\_\_\_

Association Account Number \_\_\_\_\_ Phone # \_\_\_\_\_

Property Address \_\_\_\_\_ E-Mail \_\_\_\_\_

Mailing Address \_\_\_\_\_

This authorization is to remain in full force and effect until the Association has received written notification from me (or either of us) of its termination in such time and in such manner as to afford the Association and my bank reasonable opportunity to act on it.

**ACCORD MANAGEMENT WILL SEND YOU A POSTCARD  
CONFIRMING THE STARTING DATE OF YOUR AUTOMATIC PAYMENT.**

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

**ATTACH YOUR VOIDED CHECK TO THIS FORM BEFORE MAILING  
(NOT A DEPOSIT SLIP)**