

# PARK CITY 3&4 APARTMENTS, INC.

## AUTHORIZATION AGREEMENT FOR DIRECT PAYMENT

### CONTACT INFORMATION

LAST NAME: \_\_\_\_\_

FIRST NAME: \_\_\_\_\_

M.I.: \_\_\_\_\_

TENANT ACCOUNT #: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

### PAYMENT INFORMATION

SELECT ONE: \_\_\_\_\_ CHECKING ACCOUNT ATTACH A VOIDED CHECK

\_\_\_\_\_ SAVINGS ACCOUNT ATTACH A BANK DEPOSIT TICKET WITH ACCOUNT NUMBER OR A COPY OF YOUR STATEMENT

BANK NAME: \_\_\_\_\_

NAME ON ACCOUNT: \_\_\_\_\_

BANK ROUTING NUMBER: \_\_\_\_\_

BANK ACCOUNT NUMBER: \_\_\_\_\_

### AUTHORIZATION

I (we) hereby authorize Park City 3&4 Apartments, Inc. to initiate debit entries for payments to my (our) bank account indicated above at the depository financial institution name above, hereinafter called DEPOSITORY, to debit the same to such account. I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of U.S. law.

The authorization is to remain in effect until Park City 3&4 Apartments, Inc. has received written notification of its termination in such time and in such manner as to afford Park City 3&4 Apartments, Inc. and DEPOSITORY a reasonable opportunity to act on it.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_

RETURN FORM TO PARK CITY 3&4 APARTMENTS, INC. PLEASE CONTINUE TO MAKE YOUR SCHEDULED PAYMENTS AS USUAL. YOU WILL RECEIVE A LETTER IN THE MAIL NOTIFYING YOU WHEN AUTOMATIC PAYMENTS WILL BEGIN.