

KEYSTONE VILLAS CONDOMINIUM ASSOCIATION

ACH - Direct Payment Authorization Form

1. Mark the box of the type of account from which payment will be deducted, either a checking or savings account.
2. Fill in your name, unit number/address, financial institution information, and date.
3. Attach a voided check for verification of all financial institution information.
4. Be sure to sign the form!

AUTHORIZATION FOR DIRECT PAYMENT

I authorize Keystone Villas Condominium Association to initiate electronic debit entries to my:
(check ONE)

☐ checking account

OR

☐ savings account

for payment of my condominium fee(s) on the 1st of the month, for the amount of \$_____ as well as any late fees, that are assessed (returned ACH fee). This authority will remain in effect until I have canceled it *in writing*.

Owner Name

Unit Number

Financial Institution / Bank Name (Please Print)

Account Number at Financial Institution

Financial Institution Routing/Transit Number

Beginning Month

Signature _____

Date

PLEASE KEEP A COPY OF THE AUTHORIZATION FOR YOUR RECORDS

Staple Voided Check Here