

Authorization Agreement for Direct Payments (ACH Debits)

Company Name: **Holiday Park Homeowners Association**

I (We) hereby authorize Holiday Park Homeowners Association hereinafter called Company, to initiate debit entries to my (our) Checking Account/Savings Account (select one) indicated below at the depository financial institution named below, hereafter called Depository, and 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 the U.S. Law.

Depository Name: _____

Branch: _____

City: _____

State: _____ Zip: _____

Checking Account: _____ Savings Account: _____ (Select one)

Routing Number: _____

Account Number: _____

Payment Amount: \$99.29 monthly

This authorization to remain in full force until Company has received written notification from me (or either of us) of its termination in such time and manner as to afford Company and Depository to act upon it.

Name(s): _____

Street Address: _____

Date: _____

Signature: _____

**Return this completed form to:
HPHA, PO Box 5725, Richardson, TX 75083**

For Office Use: