Highlands at Round Hill Homeowners Association

AUTHORIZATION AGREEMENT FOR DIRECT PAYMENTS (ACH DEBITS)

PLEASE PRINT ALL INFORMATION

Instead of completing this form, you may include a voided check and sign and date the form

I (We) hereby authorize Highlands at Round Hill Homeowners Association, hereinafter called "ASSOCIATION", to initiate debit entries to my (our) { } Checking or { } Savings account (select one) indicated below at the depository financial institution named below, hereinafter called "DEPOSITORY", and to debit the same to such account.

DEPOSITORY NAME:		BRANCH:	
CITY:	STATE:	ZIP CODE:	
ROUTING NUMBER:(located on the bottom of your check)	BANK ACCOUNT NUMBER:		
This authorization is to remain in full force and effect uafford the ASSOCIATION and DEPOSITORY a reaso		written notification from me (us) of its termination in such time and in such manner as t)
NAME(S):		HIGHLANDS AT ROUND HILL ACCOUNT NUMBER:	
ADDRESS:			
PHONE NUMBER:		EMAIL ADDRESS:	
SIGNED:	SIGNED:		

No Transaction Fee Associated with these services

^{**} This form authorizes Sequoia Management Company to automatically debit the above account for monthly homeowners association dues in the amount of the monthly dues as approved by the Highlands at Round Hill Board of Directors for the current budget year.***