



AUTHORIZATION FOR AUTOMATED PAYMENTS

I authorize and request Powder Wood Condominium Association, Inc. to initiate debit entries to my account. And to debit the same to such account as indicated below at the depository financial institution indicated below. This authorization is to remain in full force and effect until Powder Wood Condominium Association, Inc. has received written notification from me of its termination in such time and manner as to afford Powder Wood Condominium Association, Inc. and depository financial institution a reasonable opportunity to act on it.

Condo Owner: _____

Unit Number: _____

Bank Account Owner if different from condo owner: _____

Bank or Institution Name: _____

Bank or Institution City, State: _____

Account Type: (select one) Checking Savings

Routing Number: _____

Bank Account Number: _____

Bank Account Owner Signature: _____ Date _____

Email: _____ Phone Number: _____

PAYMENT INFORMATION

Payment is to be deducted (select one) 1st 5th 10th of each month.

Payments are monthly. The amount deducted will be the dues assessment amount, based on unit type, approved by the Powder Wood Condominium Association Management Committee.