

MEMO-Letter

amber properties co.

amber apartments

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140911-0610

To: All Amber Apartments Tenants
Royal Oak, Clawson, Berkley, Troy

Subject: Automatic Debit/Electronic Rent Payments

For your convenience and in response to many tenant requests, we offer an Automatic Debit/Electronic Rent Payment option for both existing and new tenants.

Up to two (2) accounts may be specified for Automatic Debit for the same apartment with equal rent amounts, provided that all rent for that apartment is debited electronically.

If you would like to take advantage of this convenient option, please complete and sign the brief bank authorization printed on the back of this memo, identifying the name(s) and address of your financial institution(s), the Transit/ABA Routing Number(s), and your checking or savings account number(s). If checking account(s) are to be debited, please also provide a copy of voided check(s) with your authorization.

Please note that your authorization will remain in effect until written notification is received from you terminating your authorization, with a reasonable period allowed for us to implement your instructions. All Automatic Debit/Electronic Rent Payments are scheduled for the first day of every month; if the first of the month falls on a Saturday, Sunday, or holiday account debits are usually on the next business day. *Please note that Amber Properties Company is not responsible if prior to the first business day of any month your bank elects to process the Automatic Debit/Electronic Rent Payment at its discretion.*

Thank you in advance for considering this very convenient time and potential money savings rent payment option, which we think offers all Amber Apartments tenants a hassle-free way to routinely pay rent every month.

amber properties company

(See Bank Authorization on Reverse)

Authorization Agreement for Automatic Debit (ACH DEBIT)

Tenant(s) Address _____

Month Electronic Debit to Commence: _____

Account Holder #1*

Tenant Name _____
(Please Print)

I hereby authorize Amber Properties Company to initiate debit entries to my:

Checking Savings account indicated below at the Financial Institution named below:

Financial Institution Name _____

Transit/ABA No. _____ Account No. _____

Account Holder #2*

Tenant Name _____
(Please Print)

I hereby authorize Amber Properties Company to initiate debit entries to my:

Checking Savings account indicated below at the Financial Institution named below:

Financial Institution Name _____

Transit/ABA No. _____ Account No. _____

Please attach voided check(s) for your account(s) to this authorization. Do not provide deposit slip(s).

**This authorization, including all information printed on the reverse side, is acknowledged and is to remain in full force and effect until Amber Properties Company has received written notification of its termination in such time and in such manner as to afford Amber Properties Company and your Financial Institution(s) a reasonable opportunity to act on it. If more than one account, debit amounts are only divided equally.*

Tenant Name #1 _____ Tenant Name #2 _____
(Please Print) (Please Print)

Signed x _____ Date _____ Signed x _____ Date _____

Below for Office Use Only:

Tenant Unit Identification Number _____

Date Auto Debit Entered _____ Total Rent Amount \$ _____

Date Comments Entered and File Folder Updated _____