amber properties company

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ACH Auto Pay
Authorization Agreement

220401-0174

Tenant(s) Address:

Month Auto Pay to Commence:

Up to two (2) accounts may be enrolled in Auto Pay. If more than one account, the amounts are only divided equally.

Account Holder #1 (All fields required.)

Tenant Name:
(Please print)

Financial Institution:

Account Type:

Routing Number:

Account Number:

I hereby authorize Amber Properties Company to initiate Auto Pay from my account indicated above and agree to all terms below.*

Tenant Signature:_____   **Date:**_____

Account Holder #2 (All fields required. For second bank account only. Do not provide duplicate account information.)

Tenant Name:
(Please print)

Financial Institution:

Account Type:

Routing Number:

Account Number:

I hereby authorize Amber Properties Company to initiate Auto Pay from my account indicated above and agree to all terms below.*

Tenant Signature:_____   **Date:**_____

*ACH Auto Pay Terms

Voided check(s) or other verification from your financial insitution of your routing <u>and</u> account numbers <u>must</u> accompany this authorization. Do not provide deposit slip(s).

Auto Pay is scheduled for the first business day of every month. Amber Properties Company is not responsible if prior to the first business day of any month your bank elects to process the payment request at its discretion.

Tenant(s) authorize Auto Pay amount for all rent due and to be updated according to any future changes in rent amount, of which advance written notice is given.

This authorization is acknowledged and remains in full force and effect until Amber Properties Company receives written notification of its termination in such time and in such manner as to allow Amber Properties Company and your financial institution(s) a reasonable opportunity to act on it.

For office use only:

Total rent amount: $ ($ each)

Date Auto Pay entered:

Make Skyline comments. If necessary, update file folder and ACH YES/NO in Occupant Info (Customized Items tab).

Notes: