The Empress Condominium Association, Inc.

Electronic Funds Transfer Authorization Form

I/we hereby authorize Centerstate Bank to initiate EFT debit entries (withdrawals) from my/our checking account for credit to the below-named account on or about the 1st day of the ***quarter*** *in the amount of $_____. This authority will remain in effect until I/we notify Advantage Property Mgt. otherwise. I/we understand the amount of the debit may change on an annual basis according to the requirements of the Association. I/we acknowledge that the origination of ACH transactions to my/our account must comply with the provisions of U.S. Law.*

Please be sure to enclose a "voided" check when submitting this form.

Please Check One: New Authorization_____ Bank Change Only_____

The account number to be debited: # _____

Your Bank's Routing/Transit Number: _____
(9-digit number found on lower left side of check)

The name of the account to be credited is: The Empress Condominium Association, Inc.

Account Owner's Signature(s): _____

_____

Account Owner's Name(s): _____
(Please print)

_____
(Please print)

Owner's Phone Number: _____

Property Address: _____

Month when first payment is to be debited from account: _____

Date this form was signed: _____

Send To:

Advantage Property Management
1111 SE Federal Highway, Suite 100
Stuart, FL 34994
(772) 334-8900 Fax (772) 288-0175