

**AUTHORIZATION AGREEMENT
AUTOMATIC PAYMENTS (ACH DEBITS)**

I, _____, hereby authorize Bellafont Gardens POA, hereinafter called COMPANY, to initiate debit entries and to initiate, if necessary, credit entries and adjustments for any debit entries in error to my (our) account indicated below and the financial institution named below, hereinafter called FINANCIAL INSTITUTION, to credit and/or debit the same to such account.

(Financial Institution Name)	(Branch)	
(Bank Address)	(City/State)	(Zip)
(Routing Number)	(Account Number)	

Type of Account: _____ Checking _____ Savings

This authority is to remain in full force and effect until COMPANY has received written notification from me (or either of us) of its termination in such time and manner as to afford COMPANY and FINANCIAL INSTITUTION a reasonable opportunity to act on it.

(Print Individual Name)	(Month to Start)
(Condo Address)	
(Email Address)	(Phone Number)
(Signature)	_____/_____/_____ (Date)

Please attach voided check and forward to Bellafont Gardens POA for processing.