



ASSOCIATION MANAGEMENT CONSULTANTS

C O R P O R A T I O N

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www.amconline.com

Authorization Agreement for ACH DEBITS/CREDITS (Formerly called EFT)

Property Owner Information

Association Tyler Walk Homeowners Association

Association Address: _____

Street Address

Newtown PA 18940

City State ZIP Code

Owner(s) Name _____

Last First M.I.

Mailing Address: _____

(If different than above) City State ZIP Code

Financial Institution/Account Information

Your Bank Name: _____ Branch: _____

Address: _____

City State ZIP Code

Routing Number: _____ Account Number: _____

Name(s) on Account: _____

Authorization

I (we) hereby authorize AMCC on behalf of the Tyler Walk Homeowners Association, hereinafter called COMPANY, to initiate debit/credit entries **into my (our)** **Checking Account** / **Savings Account** (select one) indicated above at the depository financial institution named above hereafter called DEPOSITORY, and to debit/credit the same to such account. I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of U.S. Law. This authorization is to remain in full force and effect until COMPANY has received written notification from me (us) of its termination in such time and in such manner as to afford COMPANY and DEPOSITORY a reasonable opportunity to act on it.

Note: Debit/Credit authorizations must provide that the receiver may revoke the authorization only by notifying the originator in the manner specified in the authorization.

Signature: _____ *Date*

Second Party Signature _____ *Date*
Second party signature required for joint accounts

For participation, this form must be completed in its entirety and returned to along with a voided check (from the above designated account).

Email application and image of voided check to: mercedes@amconline.com or mail the application and voided check to the Tyler Walk Homeowners Association: P.O. Box 2992, Warminster, PA 18974