



## Direct Deposit Authorization

\_\_\_\_ Enroll \_\_\_\_ Change \_\_\_\_ Terminate

### Bank Account Information:

Bank Name \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Bank Routing# \_\_\_\_\_ Account # \_\_\_\_\_

Type: \_\_\_\_ Checking \_\_\_\_ Savings

### Account Holder Information:

First Name \_\_\_\_\_ Last Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

**ATTACH VOIDED CHECK HERE**

\_\_\_\_ This authorizes Quintessential Properties LLC to send credit entries to my/our account(s) indicated above. This authorization will be in effect until Quintessential Properties LLC receives a written termination notice from myself and has a reasonable amount of time to do so.

**OR**

\_\_\_\_ I do not wish to participate in direct deposit at this time.

\_\_\_\_\_  
Signature (Owner) Date

\_\_\_\_\_  
Signature (Owner) Date