

# JCHiggins & Associates

A DNA INVESTMENTS INC. COMPANY

*Real Estate Leasing & Management Solutions*

## ACH Authorization Form

Name: \_\_\_\_\_ Association: \_\_\_\_\_

Account Number: \_\_\_\_\_ Manager: \_\_\_\_\_

Property Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

## CREDIT/DEBIT AUTHORIZATION

I (we) hereby authorize **JC Higgins & Associates** (the managing agent of our Owner's Association) to initiate entries to my (our) checking/savings account at the financial institution listed below, and, if necessary, initiate adjustments for any transactions credited/debited in error. This authority will remain in effect until **JC Higgins & Associates** is notified by me (us) in writing to cancel it in such time as to afford **JC Higgins & Associates** and the financial institution a reasonable opportunity to act on it.

Name of Financial Institution: \_\_\_\_\_

Address of Financial Institution: \_\_\_\_\_

**Financial Institution Routing Number:** \_\_\_\_\_

**Checking/Savings (Circle Account Type) Account Number:** \_\_\_\_\_

Set Amount: \$ \_\_\_\_\_ Maximum Amount: \$ Current Rate

Preferred Monthly Transaction Date:  1<sup>st</sup>  5<sup>th</sup>  10<sup>th</sup>  15<sup>th</sup>

**Start Date:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

