

P & M Property Management
14360 S. Tamiami Trail, Unit B
Fort Myers, FL 33912
P: 239-481-1577 / F: 239-481-1789
mindmanors@aol.com

AUTHORIZATION AGREEMENT FOR PRE-AUTHORIZED PAYMENTS

I authorize the above named Accounting Company to initiate credit entries and to initiate, if necessary, debit entries and adjustments for any credit entries to my (our) checking account listed below. Entries will be made on the 5th of each month/quarter. This form will only be used for the approval of payments. This form must be received 7 business days prior to first of the month/quarter to be processed.

Association Name: _____

Unit Number: _____

Unit Owners Name: _____

Financial Institution Name: _____

Bank Account Number: _____

(U.S. BANK ACCOUNTS ONLY)

Transit/ABA Number: _____

Type of Account: CHECKING or SAVINGS

The authority is to remain in full force until the company has received written notification from me (or either of us) of its termination in such manner as to afford the company a reasonable opportunity to act on it.

Signature of Unit Owner: _____

Date: _____

PLEASE ATTACH A VOIDED CHECK

**YOU CAN MAIL, FAX, OR EMAIL THIS FORM TO THE CONTACT LISTED ABOVE.
PLEASE BE SURE TO INCLUDE A COPY OF A VOIDED CHECK WHEN FAXING OR EMAILING.
THANK YOU.**