

AUTHORIZATION FOR AUTOMATIC PAYMENT

I authorize Backus Properties as listed below to initiate electronic entries to my checking/savings account. This authority will remain in effect until I notify you in writing to cancel it in such time as to afford the financial institution opportunity to act on it. I can stop payment of any entry by notifying my financial institution 3 days before my account is charged. If you decide to end the ACH method, or change accounts, you will be charged a \$50 administrative fee.

NAME – Please Print _____

PROPERTY ADDRESS – Please Print _____

City State Zip Code

Name of Financial Institution: _____

Street address of Financial Institution _____

City State Zip Code

Please include a voided check copy (marked void) with this authorization. A deposit slip is not acceptable.

Financial Institution Routing No.: _____

Checking Account No.: _____, OR

Savings Account No.: _____

Signature Date Date Auto Transfer to Start

----- -FOR OFFICE USE ONLY: -----

Property _____
Rent Amt: _____
Prorated rent by ACH? _____ Amount: _____
Move in Date: _____