

ELECTRONIC FUNDS TRANSFER AUTHORIZATION FORM	
Association Name:	
Property Address: (VERY IMPORTANT)	
Your Name (First, Middle Initial, Last):	
Your Contact Phone Number:	
Your Contact Email Address:	
Month of when first payment is to be debited from your account: Please note that all payments are debited between the 1 st and the 10 th of the month due	
Name of Your Bank: (Must be US Bank)	
Routing Number (Always the 9 digits preceding your account number on your check):	
Your Account Number:	
Terms And Conditions: I/we hereby authorize the Association's Financial Institution or Coastal Property Management to initiate debit entries to my/our checking account at the depository, as indicated above. I /we understand the amount of the debit may change on an annual basis according to the requirements of the Board of Directors of my Association. This authority is to remain in full force and effect until Coastal Property Management has received written notification from me(or either of us) of its termination in such time and in such manner as to afford Coastal Property Management and the Depository a reasonable opportunity to act on it. I (or either of us) have the right to stop payment of a debit entry by notification to Depository at such time as to afford Depository a reasonable opportunity to act on it prior to charging the account. After the account has been charged, I/we have the right to have the amount of an erroneous debit immediately credited to my account by Depository, provided I/we send written notice of such debit entry in error to Depository within 15 days following issuance of the account statement or 45 days after posting, which ever occurs first. I/we acknowledge that the orientation of ACH transactions to my/our account must comply with the provisions of U.S. laws. I have read the above statement and agree to its terms.	
Print your name here.	Sign your name here.
Trint your name nere.	Jign your name nere.
FAX this form to Coastal Property Management at: 772-266-9801 INCLUDE A COPY OF A VOIDED CHECK. If your Association bills MONTHLY, funds will be taken MONTHY. If your Association bills QUARTERLY, funds will be taken QUARTERLY If your Association bills SEMI-ANNUAL, funds will be taken SEMI-ANNUALLY	

You may also return this form and your voided check via the postal mail by mailing to: Coastal Property Management at 10 SE Central Parkway, Suite 400, Stuart, FL 34994