

**REPEATING DEBIT
AUTHORIZATION AGREEMENT
VIA AUTOMATIC PAYMENT (ACH)**

I\We hereby authorize **Lodges at Parker's Pond, LLC(Company)** to initiate **debit** entries as indicated below effective on the **2nd** of each month, beginning _____, including any NSF charges (\$35/each) for insufficient funds, to my checking account at the *Financial Institution* indicated below, and initiate adjustments (if necessary) for any transactions credited\debited in error. I acknowledge that the origination of ACH transactions to my account must comply with the provisions of U.S. law. This authority will remain in effect until (company) **Lodges at Parker's Pond, LLC** is notified by me in writing to cancel it in such time as to afford (company) **Lodges at Parker's Pond, LLC** and Financial Institution a reasonable opportunity to act on it.

I understand that it is my responsibility to notify Lodges at Parker's Pond, LLC of any changes to where I bank and\or account numbers at least 7 business days prior to effective date of debit.

Total Amount for Services: _____
Amount to be Debited Monthly: _____
Last Debit Date/Amount: _____
Name: _____
Address: _____
City/State/Zip: _____

Name on Checking Account: _____
Financial Institution Name: _____
Routing Number: _____
Checking Acct. Number to Debit: _____

Signature: _____ **Printed Name:** _____

Date: _____

ACCOUNT: **PAYMENT via ACH – Electronic Payment
Type of Account: **Checking** **Savings**

PLEASE ATTACH A VOIDED CHECK