A close-up of a building

Description automatically generated

**Automated Direct Debit Authorization Form (ACH)**

The Acacia Association has an agreement with Chase Bank to provide an automated and convenient way to pay your monthly assessments. With your written authorization below, we will be able to automatically debit your account, once each month.

To join, simply complete and sign this authorization form and provide a voided check. Then, on the fifteenth (15th) of each month, we will automatically pay your assessment from the account that you have designated.

By joining the program, you agree to maintain sufficient funds in your account to cover the monthly assessment. If The Acacia Association is unable to complete the transaction due to insufficient funds (NSF) or if the account has been closed, we reserve the right to charge your account for any related fees and service charges.

Automated payments will continue until we receive an ACH Discontinue Form or a notification to the Acacia Association, in writing, that you want to discontinue this service.

Bank Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Checking or Savings (circle one)

Routing Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Bank Account #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I/we authorize The Acacia Association to initiate a monthly debit to my/our Checking or Savings Account. The debit is for Acacia’s HOA monthly assessment fee, and I/we acknowledge that the origination of ACH transactions to my/our account comply with the provisions of U.S. law.

Print name(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Phone number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Today’s Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

>>>>>ATTACH YOUR VOIDED CHECK TO THIS FORM <<<<<