

## **Auto Association (ACH) Payment Authorization**

For use by Condo/Homeowner Association members that remit Association dues payments to Regions Bank only.

The most convenient way to make your Association payments. Simply complete the bottom portion of this form with the requested information, attach a void check, and your Association payments will be automatically drafted from your deposit account.

## **Important Information:**

Unit/Property Owner Record

- You must verify with your Association that ACH Payments are accepted. Any Authorization forms received that have not been approved by the Association or Property Manager will be returned. This could cause your Association payment to be delayed.
- By returning the Authorization form below, you will authorize your Association to collect your payments automatically, saving you time and money.
- Association payments are debited on the 5<sup>th</sup> day of each month. (Note: If the 5<sup>th</sup> day of the month falls on a weekend or holiday, the debit will be processed on the next business day.)
- Authorization forms must be received by the 15<sup>th</sup> day of the current month in order to be in effect for the next month's regularly scheduled payment.
- Payments can only be drafted from U.S. bank or credit union accounts titled in the name of the property (unit) owner.
- If multiple payments are made for this property (unit), a separate authorization form must be submitted for each payment. (For example, a regular monthly payment and a separate garbage payment paid with different coupons).
- Simply complete the form below with all required information and return along with a voided check to:

## Association Lockbox Services P.O. Box 11407 – Dept. 6000 Birmingham, AL 35246-6000

Association Name:	Unit No.:	
Address:		
CSZ:		
Name of Debiting Financial Institut	tion:	
Debiting Account No		
Routing/Transit Number from Ched	ck:	
Date Submitted://		
Auto Association (ACH) Payment Authorization  Complete and return with a voided check to address shown on the Authorization Coupon		
	Auto Association (ACH) Pa	ayment Authorization
Condo/Homeowner Association:		Unit No
Property Owner Name:		
Street Address:		Phone No
City: State	e/Province:	Zip/Postal Code:
Name of Financial Institution:		Phone No.
Bank Routing/Transit No.:		
Bank Account Type: Checking Savings A Voided Check Must Be Attached I authorize Condo/Homeowner Association to initiate debit entries to the account named above at the depository financial institution named above for the purpose of making my association payments. I acknowledge that the origination of ACH transactions to my account must comply with the provisions of U.S. law. This authorization is to remain in full force and effect until Condo/Homeowner Association has received written notification from me of my termination of this authorization forms must be received by the 15 <sup>th</sup> day of the current month in order to be in effect for the next month's payment.		
Unit Owner Signature  Mail To: Association	2 4.10	1407 Dept. 6000 Birmingham, AL 35246-6000
Incomplete Forms or Forms without Voided Checks will be returned to your Association or Property Management Company and may cause your Association payment to be delayed.		