

AUTHORIZATION AGREEMENT FOR DIRECT DEPOSITS (ACH DEBITS)

Community Name: The Village Grande at Camelot Homeowners Association

Owners Name : _____

Unit Address: _____, _____ NJ _____

I (we) hereby authorize The Village Grande at Camelot HOA, to initiate debit entries to my (our)
☐ checking or ☐ Savings Account (select one) indicated below at the depository financial institution
named below, hereafter called DEPOSITORY, and to debit the same to such account. I (we)
acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions
of U.S. law.

Depository
Name: _____ Branch: _____

City: _____ State: _____ Zip: _____

Routing Account
Number: _____ Number: _____

This authorization is to remain in full force and effect until COMPANY has received written notification
from me (or either of us) of its termination in such time and such manner to afford COMPANY and
DEPOSITOR a reasonable opportunity to act on it.

Name(s): _____ 9 Digit Acct. #: _____
(Please print)

Date: _____ Signature: _____

NOTE: DEBIT AUTHORIZATIONS MUST PROVIDE THAT THE RECEIVER MAY REVOKE THE
AUTHORIZATION ONLY BY NOTIFYING THE ORIGINATOR IN THE MANNER SPECIFIED IN THE
AUTHORIZATION.

**FORMS RECEIVED BY JANUARY 20TH 2012 WILL HAVE FEBRUARY PAYMENTS
AUTOMATICALLY DEDUCTED ON OR ABOUT FEBRUARY 5, 2012:**

PLEASE FORWARD ALL REQUESTS TO: The Village Grande at Camelot HOA
14000 Horizon Way, Suite 200
Mt. Laurel, NJ 08054
Fax: (856) 234-5479
Email: DBrodnick@mamcomgmt.com

Phone Number: _____

Email: _____