

****Staple Voided Check Or Other
Bank Documentation Here**

**AUTHORIZATION AGREEMENT FOR DIRECT PAYMENTS
(ACH DEBITS)**

Homeowners Association Account Number: _____

Association Name: _____

Effective the fifth day of each month, starting with the next billing cycle, I (We) hereby authorize Horizon Management Company, hereinafter called COMPANY, to initiate debit entries to my (our)

Checking Account Savings Account

indicated below at the depository institution named below, hereinafter called BANK, in the amount of any assessment duly authorized and noticed by my Association's Board of Directors. I (We) request that

The Full Balance

Only Scheduled Charges (e.g. monthly HOA fees, Board- or Membership-approved special assessments, and any monthly service charges such as parking, storage, or utilities; **any non-scheduled charges**—such as maintenance reimbursements, late charges, or violation fees—**will need to be paid for separately by check**)

be processed from the below account each month.

Bank Name: _____ Branch: _____

City: _____ State: _____ ZIP: _____

Routing Number: _____ Account Number: _____
(9 digit number on left bottom portion of check)

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 manner as to afford COMPANY and BANK reasonable opportunity to act upon it.

Please complete the below authorization; if you have chosen to use a joint bank account that requires two signatures, both signers must print and sign their name below. If there are additional required signers, contact Horizon Management Company at ach@horizonmngmt.com or (310) 543-1995 for additional form(s).

Name(s): _____
Please print Please print

Address: _____
Street City State Zip

Signature(s): _____

Date: _____ Daytime Number: _____

Valid bank documentation includes at least one of a page from a bank statement with the full account number visible, an automatic payment information form, or a letter from a bank representative verifying the account information above.

ACH is processed on the 5th of each month. It can take up to 2-3 business days before the debit shows on your bank statement.

Please Note: To ensure accuracy, you **MUST** attach a voided check or bank documentation from the account identified above.

WE MUST RECEIVE THIS FORM BEFORE THE 15TH OF THE MONTH TO START ACH THE NEXT MONTH.

YOU MUST HAVE A \$0 BALANCE AS OF THE CURRENT MONTH TO BEGIN ACH NEXT MONTH.

DO NOT STOP MAKING PAYMENTS UNTIL YOU RECEIVE CONFIRMATION THAT YOUR REQUEST FOR ACH PAYMENTS HAS BEEN PROCESSED AND THE ACH DEBIT COMMENCEMENT DATE.