

Prime Payment Solutions/Community Management/VILLAGE TOWNS OA

Bank Draft Authorization Form

VILLAGE TOWNS OA Account #: _____
Customer Name: _____
Address: _____
City/State/Zip: _____
Phone #: _____
Start Date: _____
Collection Date: 1st business day of the month
Payment Amount: \$_____ Frequency: Monthly

Bank Name: _____
Checking Acct #: _____
Routing Number: _____
Date: _____
Signature: _____

In the unlikely event that any pre-authorized checks are dishonored, you authorize Community Management to apply a \$20.00 Return Item Fee in addition to the monthly dues fee which will be processed to your account within 7 calendar days of return item notification.

(Please attach a voided check to this form & return to Community Management)