

# **RIDGE CREST CONDOMINIUM**

84 Richardson Avenue, Norton, MA 02766 - (598) 222-1220

## **Authorization Agreement For Direct Payments (AUTO DEBIT)**

I (we) hereby authorize the **Ridge Crest Condominium** to initiate debit entries to my (our) checking account indicated below at the depository financial institution named below, hereafter call Depository, and to debit the same to such account. This authorization is in place for the amount listed below and all future common area fee changes. I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of U.S. Law. This authorization is to remain in effect until Ridge Crest Condominium has received written communication from me (or either of us) of its termination in such time and in such manner as to afford Ridge Crest Condominium and Depository a reasonable time to act on it.

OWNER NAME: \_\_\_\_\_

OWNER NAME (2): \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

UNIT ADDRESS: \_\_\_\_\_

ASSOCIATION FEE: \$ \_\_\_\_\_

BANK NAME: \_\_\_\_\_ Branch \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

ROUTING #: \_\_\_\_\_

ACCOUNT #: \_\_\_\_\_

Date \_\_\_\_\_ Signature \_\_\_\_\_

**Please return completed form and a copy of a blank or voided check to:**

Ridge Crest Condominium  
c/o Lorell Management  
84 Richardson Avenue  
Norton, MA 02766

Thank you.