

ELECTRONIC FUNDS TRANSFER CONSENT CARD

Community Name _____

Co-Owner Name _____

Address: _____ City/State _____

Authorized Association Fee Amount \$ _____

*The account specified below will be debited for all future **REGULAR MONTHLY ASSESSMENT PAYMENTS ONLY**. Payments will be deducted on the **5th** of each month or the first bank working day thereafter.*

The Co-Owner will not receive a payment coupon book while on this program.

*In the event a Co-Owner wishes to change bank accounts, they shall notify the Office of BLS Property Management and a new Consent Card must be filled out and returned by the **20th** of the month.*

*The Co-Owner may withdraw from this service provided it is done in writing and BLS Property Management has received notification prior to the **20th** of the month.*

Please fill-out the below in its entirety. A voided check must be submitted with this card. Any portion of this card NOT completed will result in it being returned to the Co-Owner and the service delayed. This form must be returned to BLS Property Management by the 20th of the month, to be activated for the following month. No other correspondence will follow.

Bank/Institution Name _____

Bank/Institution Routing Number _____

You must choose One:

Checking Account Number _____

Savings Account Number _____

Money Market Account Number _____

Co-owner Signature _____ Date _____

In the event that the account does not contain sufficient funds on the date of transfer, a late fee and non-sufficient funds fee will be assessed in accordance with the prevailing policy.