

ACH DEBIT AUTHORIZATION AGREEMENT FOX RUN

2030 Terry St, Suite 104 | Longmont, CO 80501

303.682.0098 303.682.1111 (fax)

fmc900@flagstaffmanagement.com flagstaffmanagement.com

I hereby authorize **FLAGSTAFF MANAGEMENT, INC.** (herein "FLAGSTAFF") to initiate debit entries, as stated below, to my checking account identified below at the depository financial institution named below, herein called "**MY BANK**," and to debit the same to such account. I acknowledge that the authorization of ACH transactions and debit entries pursuant thereto to my account must comply with United States Law.

If MY BANK does not honor a debit entry for any reason including, but not limited to, insufficient funds, I remain liable for the amount of the debit entry, for all other assessments owed to the homeowners association to which I am subject, for a \$20.00 service charge upon my HOA account, and for any service fee charged directly to me by MY BANK.

YOU MUST PROVIDE THE FOLLOWING "MY BANK" ACCOUNT INFORMATION. You must include a VOIDED CHECK on the account deductions will occur from.

MY BANK INFORMATION

STATE	ZIP CODE
ACCOUNT NUMBER	
15th of a calendar month, or on the Fr F may increase the deduction amount of t due assessments are to be paid the d nt to reflect my then current monthly HO and effect until FLAGSTAFF MANAGEMENT n must be received by the 10th day of	only reflect a permanent increase eduction, once paid, I understand A assessment amount or my zero
DATE :	SUBMITTED
CELL PHONE	
FO	R OFFICE USE ONLY
ACCO	OUNT CODE
	ENTERED
	ACCOUNT NUMBER