





ACH DEBIT AUTHORIZATION AGREEMENT

ATTENTION RESIDENTS: If you are currently using ACH we will need approval to withdraw your new rent amount. If you wish to continue using this service, please submit your updated ACH form with your lease renewal. This amount will be effective 7.1.2008. Thank You.

AUTHORIZATION AGREEMENT 6 FOR PRE-ARRANGED PAYMENTS (ACH DEBITS)	
COMPANY NAME EASTMORE REAL ESTATE	COMPANY ID NUMBER
I (we) hereby authorize <u>Eastmore Real Estate</u> Hereinafter called COMPANY, to initiate debit entries in the amount of my monthly lease charges due, to my (our) Checking account indicated below and the depository named below, hereinafter called DEPOSITORY, to debit the same to such account. DATE OF WITHDRAWAL <u>2ND OF EVERY MONTH</u>	

DEPOSITORY NAME	BRANCH	TRANSIT/ABA NUMBER
CITY, STATE, ZIP	ACCOUNT NUMBER	
ACCOUNT TYPE CHOOSE ONE: CHECKING <input type="checkbox"/> SAVINGS <input type="checkbox"/> WITHDRAWAL TO BEGIN _____		
This authority is to remain in full force and effective until COMPANY and DEPOSITORY has received written notification from me (or either of us) of its termination 10 days prior to the next scheduled Debit transaction. I (or either of us) has the right to stop payment of a debit entry by notification to DEPOSITORY 10 days prior to the next scheduled Debit transaction. After account has been charged, I have the right to have the amount of an erroneous debit immediately credited to my account by DEPOSITORY, provided I (we) send written notice of such debit entry in error to DEPOSITORY within 15 days following issuance of the account statement for 45 days after posting, whichever occurs first.		
Amount of Withdrawal \$	DATE	IDENTIFICATION NUMBER/SS #
NAME (PLEASE PRINT) ADDRESS		NAME (PLEASE PRINT) ADDRESS
 RESIDENT SIGNATURE	 RESIDENT SIGNATURE	

CANCELLATION ACKNOWLEDGEMENT-FOR TERMINATING PRE-ARRANGED PAYMENTS (ACH DEBITS)
I, _____, here by give Eastmore Real Estate notice of ACH Debit termination. I give authorization for _____, _____ rent for apartment number _____ be (Month) (Year) the last ACH Debit from the bank account I provided above.
 RESIDENT SIGNATURE _____ DATE _____
 RESIDENT SIGNATURE _____ DATE _____
MUST BE GIVEN TO EASTMORE REAL ESTATE 10 DAYS PRIOR TO SCHEDULED DEBIT TRANSACTION LISTED ABOVE.