



MANAGEMENT AND ASSOCIATES
Professional Property Management

MAINTENANCE FEE AUTO DEBIT AUTHORIZATION FORM

ASSOCIATION NAME: _____

PROPERTY ADDRESS: _____

NAME ON DEED: _____

MAINTENANCE ACCT: _____

MONTH START DATE: _____

ASSESSMENT FREQUENCY: **PLEASE NOTE**

Whether your association is set up for monthly or quarterly payment is predetermined by your Homeowner/Condominium Association.

Special Assessments Cannot be Automatically Debited.

ASSESSMENT AMOUNT: \$ _____

NAME OF BANK: _____

NAME ON ACCOUNT: _____

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I have included a **blank voided check** and hereby authorize my financial institution to debit my account in the name of my Association. I understand the account **must be one issued from a bank within the United States.** I understand this debit will appear on my bank statement under the description **Maintenance Fee** on the first Saturday of the assessed month. In addition, I understand this auto debit will remain until I notify Management and Associates **in writing 30 days prior** to canceling the auto debit. I also give authority to increase/decrease the amount of the maintenance fee as they are determined by the Board of Directors of my Association.

If we do not receive your completed form by the 15th of the month, your direct debit will be processed for the following assessed month. Should you have any questions please call the number below.

SIGNATURE: _____ DATE: _____

RETURN COMPLETED FORM TO: Management and Associates
720 Brooker Creek Blvd. #206
Oldsmar, FL 34677
(813) 433-2000