

AUTHORIZATION AGREEMENT FOR PREAUTHORIZED PAYMENTS

I hereby authorize Hames Communities, LLC dba Grand View hereinafter called **Company** to initiate electronic debit entries to my account indicated below to fulfill my

□ Home Site Rent	🗆 Open Storage Re	Open Storage Rent	
□ Garage Rent	Community Room Rental		
□ Fees for Services Rendered			
Withdrawn on: 🗆 First of Month	n 🗆 Third of Mo	nth 🗆 One Time Debit	
Starting/	_/		
I have supplied my financial in	stitution's (Depository's)	name and my account number below.	
Depository Bank		Transit/Routing Number	
City	State	Account Number	
	(We) acknowledge that t	Ompany has received written notification from me of he origination of ACH transactions to my (our) account must	
Name (please print)		Resident ID Number	
Date		Signature	
>	* PLEASE ATTACI	H A VOIDED CHECK *	