

SOUTHWEST PROPERTY MANAGEMENT
CORPORATION

1044 CASTELLO DRIVE, SUITE #206
NAPLES, FLORIDA 34103-1900
(239) 261-3440 ♦ FAX: (239) 261-2013

**Maintenance Fee
Electronic Payment Authorization**

Association Name: _____

Name on Deed: _____

Property Address: _____

Maintenance Fee Account #: _____

Month Start Date: _____

Assessment Frequency: According to your Association Documents.

Name of Bank: _____

Name(s) on Bank Account: _____

Account to be Charged: Checking Savings

Home Phone #: _____ Daytime Phone #: _____

I HAVE INCLUDED A BLANK, VOIDED CHECK and hereby authorize my financial institution to debit my account in the name of my homeowners association. I understand this debit will appear on my bank statement under the description of "association lock box". I also realize the auto-debit will appear on my bank statement between the 5th and 10th working day of each month, if a monthly assessment or between the 5th and 10th working day of the first month of the quarter, if a quarterly assessment. In addition, I understand this auto-debit will remain until I notify my association in writing thirty (30) days prior to canceling the auto-debit. I also give the association authority to change the auto-debit amount as maintenance fees are changed by the Board of Directors.

Signature: _____ Date: _____

PLEASE RETURN COMPLETED FORM TO: Southwest Property Management Corp.
1044 Castello Dr., Suite #206
Naples, FL 34103-1900