**WANT TO SAVE TIME AND POSTAGE COST?**

This form is to register for a direct debit service to pay for your monthly dues eliminating the need to write a check. Just complete this Direct Debit Authorization Form, sign it, include a **VOIDED** check from the account you wish the Bank to debit and mail it to us in the Cash Management Department at:

**Ironwedge Property Owners Association, Inc.**

c/o Victory Accounting Services, Inc.

1500 Gateway Blvd # 220

Boynton Beach, FL 33426

Tel (561) 739-7990

**Name of your Bank:**

**Checking ( ) Savings ( ) Account #:**

**Bank Routing #:**

**Total Payment Amount: \_\_\_\_\_ \_\_\_\_\_\_\_**

**Start Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Name: \_\_\_\_\_\_**

**Address: \_\_\_\_\_\_**

**Phone Number: \_\_\_\_\_\_**

**Email Address: \_\_\_\_\_\_**

**Association Name: \_**

**Account/Unit Number:**

I have included a Blank Voided Check (must be a bank located within the United States) 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 between the 1st and the 5th day of each month (if monthly assessment) or the 1st and 5th day of the first month of the quarter (if quarterly assessment). In addition, I understand this auto debit will remain until I notify my association in writing 30 days prior to canceling the auto debit. I also give the association authority to increase the auto debit as the Board of Directors increases the maintenance fees.

**Signature: \_\_\_\_\_\_**

**Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_**