



LANDMARC REAL ESTATE

Electronic Payments Department
PO Box 7268
Fredericksburg, VA 22404-7268
www.e-landmarc.com

ACH Pre-Authorized Payments Agreement (Direct Debit Payments)

This is my authorization for Landmarc Real Estate, to **automatically** debit my

checking ____ savings ____ account _____
Bank Account Number

_____ at _____ in
9 Digit Bank Transit/ABA Number/Routing Number Name of Banking Institution

_____, _____
City State

I understand that this authorization will be in effect until I notify Landmarc Real Estate in writing that I no longer desire the service, allowing reasonable time to act on my notification. I understand that failing to notify Landmarc Real Estate of any changes to my account or if there are not sufficient funds in the account at the time of the debit, may result a returned item fee charged to my account.

I have the right to stop payment of a debit entry by notifying Landmarc Real Estate **BEFORE** the account is charged. If an erroneous debit entry is charged against my account, I have the right to have the amount of the entry credited to my account by Landmarc Real Estate to my financial institution, if, within 15 days following the date on which I was sent a statement of account or a written notice of such entry or 45 days after posting, whichever occurs first, I give Landmarc Real Estate a written notice identifying the entry, stating that it is an error and requesting a credit back to my account.

I understand that after two returned payments, Landmarc Real Estate has the right to cancel my ACH Direct Debit with or without notice.

I understand this authorization in non-negotiable and non-transferable. If I wish to cancel my ACH Direct Debit I must notify Landmarc in writing to cancel the service or complete a new authorization form to change the account that is debited.

Customer Name 5 Digit Association Account Number

Community Name Street Address

Telephone No. or email address

REQUESTED START DATE: _____

Signature Date

PLEASE INCLUDE A VOIDED CHECK WITH COMPLETED ENROLLMENT FORM. ALL APPLICATIONS MUST BE RECEIVED 7- 10 DAYS PRIOR TO THE FIRST DAY OF THE NEXT PAYMENT CYCLE FOR PROCESSING. ACH PAYMENTS ARE PROCESSED BETWEEN THE 2ND AND THE 5TH DAY OF EVERY PAYMENT CYCLE. A LETTER OF CONFIRMATION WILL BE SENT UPON RECEIPT.

For Office Use Only:

Start Month/Year: _____ Confirmation Letter Sent: _____ Q or M: \$ _____