

PS Property Management Company

P.O. Box 7079
Round Rock, TX 78683
P (512) 251-6122
F (512) 251-3470
psproperty@psprop.net

Dear Homeowner:

PS Property Management Company is offering you the opportunity to sign up for Direct Payment. This will allow you to pay your homeowners dues automatically. **This is a free service that we wish to extend to our homeowners.** When you enroll in the Direct Payment program, we will send an electronic draft to your bank between the 5th and 10th of each month.

Please Note: Fines, late fees, collection fees and past due balances will not be automatically drafted. To sign up for Direct Payment, complete and sign the authorization form. You must have a zero balance with your association to be eligible for this service. **Multiple unit owners will need to fill out a separate Direct payment form for each property address to insure proper application of their payments.**

Direct Debit Authorization

I (we) hereby authorize PS Property Management Company, Inc. to initiate debit entries to my (our) banking account indicated below and the depository (bank) named below. This authorization is for homeowner assessments and special assessments (if any) of any kind will be drafted from your account.

Depository Name _____ Checking or Savings (circle one)

Routing/Transit/ABA No. _____ Bank Account No. _____

Starting Month _____ Application must be received in our office by the 30th of the month for debit to begin the following month.

This authority is to remain in full force until PS Property Management has received **written** notification from the homeowner of its termination 15 days prior to the day the account is to be debited.

Name(s) _____

(Please Print Name(s) as shown on Account)

Signed _____ Date _____

Signed _____ Date _____

*****Please attach a voided check for verification of the bank transit number and account number.*****

If choosing a savings account or using a credit union, please obtain the transit routing/account number from financial institution

Association Name _____
(Subdivision or condominium complex name)

Property Address _____
(The address that you wish the payment to be applied)

Contact Numbers: (H) _____ (W) _____

OFFICE USE ONLY

Received ___/___/___

Entered ___/___/___

Amount \$ _____

Entered by: _____