



AUTHORIZATION AGREEMENT FOR AUTOMATIC DEPOSITS (CREDITS)

Owner Name _____ Phone # _____

Address(s) of Managed Property(ies): _____

I (we) hereby authorize **HENDERSON PROPERTIES, INC.** to initiate credit entries or such adjusting entries to my (our) Checking ____ Savings ____ account indicated below and the depository (banking institution) named below to credit (or debit) the same account. **Debits will only be instituted if a credit was applied for the wrong amount.**

Depository (Bank) Name: _____

Branch (City): _____ Account Rep Name: _____

Branch Phone # (if available): _____

ABA/Transit Routing Number: _____

Account Number: _____

This authority is to remain in full force and effect until Henderson Properties has received written notification from me (or either of us) of its termination in such time and in such manner as to afford Henderson Properties to act on it.

Names: _____ Date: _____

(Please attach a voided check.)

Office Use Only:

Date Prenoted: _____

Date Active: _____

Processed By: _____

Property Manager: _____