**Townhouse Villages at River Woods**

**ACH Authorization Form**\*\*\*This form **MUST** be accompanied by a **Printed Voided Check**\*\*\*

Please pay my monthly fees from my bank account automatically Yes NO

Add Delete Change

Name:

Unit Address:

City: State: Zip:

Phone: Email

**Funds Settlement Information**

Bank Name: (Checking Account Only)

Account Holder Name:

Account Holder Address:

City: State: Zip:

Routing # from check (9 digits)

Account #

I authorize Townhouse Villages at River Woods and the financial institution named above to initiate withdrawals from my checking account. **Withdrawals will only include monthly recurring charges and will not include miscellaneous charges, late fees and legal fees.** This authority will remain in effect until such time as I notify you in writing that it be canceled.

/

Account Owner Signature Date

Print Name

**Directions:**

**Please attach to this form a voided check blank from the designated account and mail to River Woods, 334 River Woods Lane, Burnsville, MN 55337. Automatic payments are deducted from your account on the 1st of each month or following business day if the 1st falls on a weekend or holiday.**

**This form must be received at the River Woods office by the 20th of the month to be effective for payment of the next month’s dues; this includes additions, deletions or changes.**