



## ACH Authorization Form

### CREDIT/DEBIT AUTHORIZATION FORM

I (We) hereby authorize Peace of Mind Property Management to initiate entries to my (our) checking/savings accounts at the financial institution listed below, and, if necessary, initiate adjustments for any transactions credited/debited in error. This authority will remain in effect until Peace of Mind Property Management is notified by me (us) in writing to cancel it in such time to afford Peace of Mind Property Management and (The Financial Institution) a reasonable opportunity to act on it.

---

Name of Financial Institution

---

Address of Financial Institution - Branch, City, State, & Zip

---

Signature

---

Date

---

Name - PLEASE PRINT

---

Address - PLEASE PRINT

Financial Institution Routing Number: \_\_\_\_\_

Checking/Savings Account Number: \_\_\_\_\_