

DIRECT DEPOSIT AUTHORIZATION AGREEMENT

I hereby authorize **Sweyer Property Management** to initiate automatic deposits to my account at the financial institution named below.

Further, I agree not to hold **Sweyer Property Management** responsible for any delay or loss of funds due to incorrect or incomplete information supplied by me or by my financial institution or due to an error on the part of my financial institution in depositing funds to my account.

This agreement will remain in effect until **Sweyer Property Management** receives written notice of cancellation or change from me or my financial institution.

Property Owner:
(Name as it appears on the Property Management Agreement)
BANK ACCOUNT INFORMATION
Financial Institution Name:
Name on Bank Account:
Routing Number:
Account Number:
Choose One: Savings Checking
* Attach copy of voided check – deposit slips are <u>not</u> acceptable due to routing number differences. (If you are not able to submit check copy – please be reminded that Sweyer Property Management is not responsible for incorrect or incomplete information supplied and so you are encouraged to contact your financial institution to verify account & routing number information PRIOR TO SUBMITTING FORM)
SIGNATURE
Authorized Signature: Date:
Authorized Signature: Date: