## SOLID ROCK PROPERTY MANAGEMENT ....

## www.SolidRockAR.com

PO Box 180, Bryant, AR 72089

Phone: 501-612-3260 Email: Info@SolidRockAR.com



## **DIRECT DEBIT AGREEMENT**

Name:	SSN#
FINANCIAL INSTITUTION INFORMATION	*** ATTACH A VOIDED CHECK
Name of Financial Institution:	
Routing #:	Account #
Checking	Savings
City:	State: Zip:
AUTHORIZATION	
I hereby authorize Solid Rock Property Management, Lechecking/savings account indicated above and the Final account. I agree Solid Rock Property Management, LLC the time of the initiation unless other WRITTEN arrang Management, LLC will debit an additional \$2.00 convertions authorization will remain in force until Solid Rock notice of cancellation from me. Notice of cancellation cancellation and in such manor to afford Solid Rock Proto act on it and in no event shall it be effective with retthe notice of cancellation.	ancial Institution above to post the same to such a will debit the total balance due on my account at gements have been approved. Solid Rock Property mience fee per transaction.  Property Management, LLC receives WRITTEN MUST be received at least 30 days prior to operty Management, LLC reasonable opportunity
I further authorize Solid Rock Property Management, I may be necessary to correct any erroneous debit entri Financial Institution to accept and to credit or debit th	ies previously initiated thereto and I authorize the
All entries initiated hereunder are to be governed in all Clearing House Association (NACHA) thereafter in effe	
Signed:	Date: