



## AUTHORIZATION AGREEMENT FOR AUTOMATIC DEBITS

I hereby authorize **Community Association for Portofino, Inc.** ("Association") to initiate monthly debits from my (select one):

Checking Account      or       Savings Account

in the amount of **\$120.00** per month. I understand that this amount will not change and is in full force until written notification is received by myself (homeowner). The withdrawal will occur on the 10<sup>th</sup> of each month, or the following business day. Monthly drafts from my account will begin \_\_\_\_\_ (MM/YYYY).

If for any reason my bank account number and/or financial institution changes, I must notify, in writing, the Association by the 5<sup>th</sup> of the month. If this is not done in a timely manner and the debit is returned (for any reason), I understand that I will be charged a \$25 penalty. Changes in account numbers and institutions require a new Authorization Agreement and a two (2) week processing period. During this time fees should be paid by check.

Homeowner: \_\_\_\_\_

Property Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Lot #: \_\_\_\_\_

Email Address: \_\_\_\_\_

Financial Institution: \_\_\_\_\_ Branch: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Transit/ABA Number: \_\_\_\_\_

Account Number: \_\_\_\_\_

*(Please ensure the above numbers are accurate and clearly written as rejected numbers may result in a fee)*

Remit to:  
2801 SW Archer Road, Gainesville, FL 32608  
[HOA@emmergroup.com](mailto:HOA@emmergroup.com)

HOMEOWNER SIGNATURE: \_\_\_\_\_

Date: \_\_\_\_\_