

**Port Warren HOA & MOA**  
ACH AUTOMATIC WITHDRAWAL AUTHORIZATION

**Purpose of Authorization: (check one)**

- New Authorization                       Change to Existing Authorization                       Cancellation  
(Complete A,B,C and F)                      (Complete A,B,C,D and F)                      (Complete A and E)

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**A      Customer Information**

Customer's Name (please print) \_\_\_\_\_ Condo and or Slip Number \_\_\_\_\_

Address \_\_\_\_\_ City, State, Zip \_\_\_\_\_

Email \_\_\_\_\_ Phone \_\_\_\_\_

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**B      Banking/Financial Institution Information**

Name of Bank/Financial Institution \_\_\_\_\_ Phone Number of Institution \_\_\_\_\_

Address \_\_\_\_\_ Account Number \_\_\_\_\_

Address \_\_\_\_\_ City,State, Zip \_\_\_\_\_

Bank ABA/Routing # \_\_\_\_\_  Checking     Savings

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**C      New Authorization Statement**

I authorize and request Port Warren HOA/MOA to instruct my financial my financial institution to make my monthly payment in the amount of \$\_\_\_\_\_ for the HOA and \$\_\_\_\_\_ for the MOA. Garbage and parking yearly fee will be included once a year in April for owners only owning slips. **Fee increases will be automatically updated for payments.** Condo owners' dog fee's will also be automatically included monthly. I also understand I may discontinue this authorization at any time by giving written notice to Port Warren HOA/MOA. I realize this information will be used solely for the purpose of consumer withdrawal. Special assessment will not be automatically taken unless in writing.

Customer's Signature \_\_\_\_\_ Date \_\_\_\_\_

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**D      Change Authorization Statement**

I authorize and request Port Warren HOA/MOA to make the changes indicated on this form for automatic withdrawal for monthly payment to my account.

Customer's Signature \_\_\_\_\_ Date \_\_\_\_\_

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**E      Cancellation Statement**

I request Port Warren HOA/MOA to terminate my authorized automatic withdrawal for payment to my account. I will allow a reasonable time for Port Warren HOA/MOA to act upon my request to terminate this agreement.

Customer's Signature \_\_\_\_\_ Date \_\_\_\_\_

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**F      Attach a voided check**