

# Automatic Debit Authorization Form

(ACH-Automatic Clearing House)  
Aspen Group Property Management, LLP

The information that you provide on this form will allow Aspen Group Property Management, to directly debit your bank account for your monthly rent. This form must be filled out completely and legibly, and be delivered to our office before the twentieth (20<sup>th</sup>) of the month to ensure enough time to guarantee processing for the next calendar month.

<b>TENANT INFORMATION</b>	Tenant _____	Name of Individual or Entity's account to be debited (Bank Account Holder) _____
	Property Address _____ Unit # _____	Address of record (if different from the property address) _____
	City, State, Zip _____	City, State, Zip (if different from the property address) _____
	Home Phone # _____	Work Phone # _____
	Cellular # _____	Email Address _____
<b>DEBIT ACCOUNT INFORMATION</b>	<input type="checkbox"/> Checking <input type="checkbox"/> Savings	
	Name of Financial Institution _____	
	Financial Institution Address _____	
	City, State, Zip _____	
	Routing & Transit Number (9-digit number) _____	
	Account Number _____	

## Terms and Conditions / Authorization Agreement

Debit transactions are scheduled for the first (1st) of the month. These transactions will post between the first (1st) and seventh (7th) of every month, depending on weekends and bank holidays. The automated debit will be for the current monthly rent only. Any additional fees incurred on the account such as late charges or damages must be paid by check, sent to Aspen Group Property Management. Should your rent change, your account will be debited for the new amount automatically. The account owner is responsible for verifying routing and account information with their bank before submitting authorization.

This authorization is to remain in full force and effect until Aspen Group Property Management has received written notification from the renter of the property, or the Debit Account Owner, should the two be different. This written notification should be received thirty (30) days prior to the last transaction date, as to ensure that the automatic debit process has been stopped.

Aspen Group Property Management reserves the right to cancel this authorization at any time.

Should an NSF notification be received from your bank, you will automatically be cancelled from the automated debit authorization, a twenty-five (\$25) dollar NSF charge will be added to your account. Additionally, you will be responsible for any late fees that may accrue on your account during the NSF process. You will be required to pay your balance with a cashier's check and you will not be granted automated debit authorization for six (6) months.

I/We acknowledge our understanding of the above terms, and authorize monies to be debited from the account listed above by Aspen Group Property Management and Kirkwood Bank.

Tenant Signature	Printed Name	Date
Month: _____ Year: _____	\$ _____	
Start date of ACH process (please provide Month & Year)	Current Rent Amount to be debited from account	
Account Owner Signature (If different from Renter)	Printed Name	Date

Please attach a voided check to this form and return to: Aspen Group Property Management  
424 S. 3<sup>rd</sup> Street, Suite # 1 · Bismarck, ND 58504