



Timber Greens Community Association, Inc.
6333 Timber Greens Boulevard
New Port Richey, FL 34655
727-372-8633
Fax: 727-372-6306
timbergreens@aol.com

AUTO PAYMENT AUTHORIZATION FORM

I hereby authorize Timber Greens Community Association, Inc. to initiate a debit to my bank account on the 10th of each month (or next banking business day) for the amount of my monthly statement payment.

I understand that this authorization remains in effect until Timber Greens Community Association, Inc. receives from me, written notification to terminate the authorization in such a time and manner as to afford the Association's financial institution reasonable time to act on it.

I understand that if errors are detected on the monthly statement, corrections will reflect in the following month's debit to my account.

Name _____

Phone Number _____ Lot # _____

Signature _____

Financial Institution _____

You will receive a letter of confirmation to inform you of the date your automatic deduction will begin.

A VOIDED CHECK MUST ACCOMPANY THIS FORM.

Deposit tickets are not acceptable verification of proper account information.

Office use:

Letter sent:

Month to pre-note:

Month to begin ACH: