

Legacy Community Partners ACH Authorization Form

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Automatic Payment Authorization

To pay your association fees automatically each month, just complete and sign this authorization form and return it to Legacy before the payment is due. Please be sure to attach a voided check.

I (we) authorize Legacy Community Partners to initiate entries to my (our) account described below:

Bank Account Number: _____

Bank Name: _____

Bank Address: _____

Routing Number: _____

(Routing number is found in the bottom left corner of the check between the colons |:_____:|)

This authority is to remain in full force and effect until Legacy has received written notification from me (or either one of us) of its termination in such time as to afford the association a reasonable opportunity to act on it.

Community Name: _____

Full Name: _____

Signature: _____

Address: _____

Lot Number: _____

Telephone: _____

Email: _____

Date: _____

Start Date: _____

**No Checks!
No Stamps!
No Time!
No Worries!**