

AMPRO Property Management

1075 Fairburn Road, Suite 109
Atlanta, GA 30331
404-593-0399
770-997-0225 (fax)



Direct Deposit Agreement Form

Authorization Agreement

I hereby authorize **AMPRO Property Management** to initiate automatic deposits to my account at the financial institution named below. I also authorize **AMPRO Property Management** to make withdrawals from this account in the event that a credit entry is made in error.

Further, I agree not to hold **AMPRO Property Management** responsible for any delay or loss of funds due to incorrect or incomplete information supplied by me or by my financial institution or due to an error on the part of my financial institution in depositing funds to my account.

This agreement will remain in effect until **AMPRO Property Management** receives a written notice of cancellation from me or my financial institution, or until I submit a new direct deposit form to **AMPRO Property Management**.

Account Information

Name of Financial Institution: _____

Routing Number: _____

Account Number: _____

Checking

Savings

Signature

Authorized Signature (Primary): _____ **Date:** _____

Authorized Signature (Joint): _____ **Date:** _____

Please attach a voided check or deposit slip and return this form to AMPRO Property Management.