

# CAPMANAGEMENT

910 16th Street, Suite 1010  
Denver CO 80202

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WEB [www.capmanagement.com](http://www.capmanagement.com)

## ACH/EFT REQUEST FORM

CAP Management offers homeowners ACH/EFT (automatic withdrawal from your checking or savings account) to pay your recurring assessments. If you would like to sign up for this service, please fill out the "Authorization for Direct Withdraw" section located at the bottom of this page and attach a voided check.

*You have two options to submit this request:*

1) Mail this authorization form with a blank voided check (not a deposit slip) to:

**CAP Management**  
**910 16th St. Suite 1010**  
**Denver CO 80202**

*Or*

2) Email completed form and blank voided check to:

**kent@capmanagement.com**

All HOA assessment payments will be withdrawn on the 10<sup>th</sup> of the month. This form will activate your automatic withdrawal **only if it is received no later than the 1<sup>st</sup>** of the month you want ACH to begin. Otherwise, it will begin on the following month – *no exceptions*.

Please contact us if you have further questions or need assistance.

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### AUTHORIZATION AGREEMENT FOR DIRECT DEPOSITS (ACH CREDITS)

ASSOCIATION NAME: \_\_\_\_\_

PROPERTY ADDRESS: \_\_\_\_\_

I HEREBY AUTHORIZE OUR HOMEOWNERS ASSOCIATION, HEREINAFTER CALLED "COMPANY", TO INITIATE A MONTHLY CREDIT TRANSACTION IN THE AMOUNT OF OUR CURRENT ASSESSMENT FEE, FROM MY/OUR ACCOUNT INDICATED BELOW AT THE BANK NAMED BELOW, HEREINAFTER CALLED "DEPOSITORY", TO CREDIT THE SAME TO SUCH ACCOUNT.

DEPOSITORY (BANK) NAME: \_\_\_\_\_

BRANCH: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

ROUTING#: \_\_\_\_\_ ACCOUNT#: \_\_\_\_\_

(CHECK ONE) CHECKING ACCOUNT \_\_\_\_\_ SAVINGS ACCOUNT \_\_\_\_\_

Month requested to begin: Month: \_\_\_\_\_ Year: \_\_\_\_\_

THIS AUTHORIZATION IS TO REMAIN IN FULL FORCE AND EFFECT UNTIL TERMINATED, IN WRITING, BY EITHER THE HOMEOWNER OR "COMPANY".

Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Name 2: \_\_\_\_\_ Signature: \_\_\_\_\_