

**AUTHORIZATION FOR DIRECT PAYMENTS
(ACH CREDITS)**



Merchant Information

Name: **Westside Property Management Inc.**
Address: 2116 Wilshire Blvd., Suite 211
Santa Monica, CA 90403
Phone: 310-310-8063

RE: ACH Authorization

In consideration of the services provided to me by MERCHANT; as listed above, I hereby authorize MERCHANT to initiate a credit entry to my checking account indicated below at the same depository financial institution named below, hereinafter called DEPOSITORY, and to credit the same to such account for any amount MERCHANT deems necessary. I acknowledge that the origination of ACH transaction to my account must comply with the provisions of U.S. law.

Depository Bank: _____

Branch (City, State Zip): _____

Account Number: _____ []Checking [] Savings

ACH Routing Number: _____

Name on the Account: _____

Phone Number: _____

This authorization is to remain in full force and effect for all transaction, The specific credit to my account authorized herein may only post on or after the EFFECTIVE DATE listed above, and in no event may the credit transaction post to my account prior to said date,

I may only revoke this authorization by contacting MERCHANT directly at the address and phone number listed above.

Name: _____ Date: _____
(Please Print)

Signature: _____

Property under management: _____

PLEASE ATTACH A COPY OF A VOIDED CHECK ALONG WITH THIS FORM