

Direct Deposit Agreement

Office: (619)342-7850

Fax: (888)470-5928

2810 Camino Del Rio S #101

San Diego CA 92108

OWNER INFORMATION

First Name _____ Last Name _____

Social Security Number (Tax Purposes ONLY) _____

Spouse/Partner Name _____

Mailing Address _____

City _____ State _____ Zip Code _____

e-Mail Address _____

Phone _____ Home Mobile Phone _____ Home Mobile

DIRECT DEPOSIT

Authorization Agreement for ClearPay Service

I hereby authorize Property Management of San Diego, hereinafter called COMPANY, to initiate credit entries and to initiate, if necessary, debt entries and adjustments for any credit entries in error to my checking or savings account indicated below and the depository institution named below, hereinafter called DEPOSITORY, **to credit and/or debit the same to such account**. This authorization will allow the COMPANY to provide e-mail statements in place of paper statements. *Please provide and attach a VOIDED CHECK for our records and account verification.

Bank Name _____ Branch _____

City _____ State _____ Zip Code _____

Transit/Routing Number _____

Account Number _____

This authority is to remain in full force and effect until COMPANY has received written notification from me of its termination in such time and in such manner as to afford COMPANY and DEPOSITORY a reasonable opportunity to act on it.