

**EAST RIVER HOUSING CORPORATION
AUTHORIZATION AGREEMENT FOR DIRECT PAYMENTS (ACH DEBITS)**

To: East River Housing Corporation

1. **Authorization to Debit Checking Account.** I/we authorize East River Housing Corporation ("East River") to initiate debit entries to my/our **Checking Account** (the "**Account**") listed below at the **Bank** named below (the "**Depository**"), and to debit and charge the amounts of the debit entries to such Account for monthly maintenance, storage, parking, electrical and other charges owed by me/us to East River from time to time. I/we acknowledge that the origination of ACH transactions (such as automatic debits) to my/our Account must comply with the provisions of U.S. law.

2. **Debits May Vary in Amount; Notices.** The amount debited may vary each month due to changes in my/our monthly electricity fees, maintenance charges and the like. **East River will give me/us written notice of the date and amount of each debit at least ten (10) days prior to initiating the debit** to the Account. If I/we want the monthly notice mailed to me/us, and not left at my/our door, I/we have provided and will provide pre-addressed envelopes to East River, when requested.

3. **Required Information. Instructions: ATTACH A VOIDED CHECK FOR THE ACCOUNT. FILL IN THE BLANKS.** (Take great care to make sure that the Account Number and Bank Routing Number are correct.)

DEPOSITORY BANK'S NAME: _____
BRANCH: _____ CITY: _____ STATE: _____ ZIP: _____
DEPOSITORY BANK'S ROUTING NUMBER: _____
MY(OUR) CHECKING ACCOUNT NUMBER: _____

4. **Changes to Account.** if I/we close out or change my/our **Account**, I/we must give East River a **new completed Authorization Agreement form** with voided check, at least **one month before** the change is to be made.

5. **Termination of Automatic Debits.** This is a completely voluntary service provided by East River for convenience. **(A) East River can terminate** the service and cancel this Authorization immediately at any time, without notice. **(B) I/we can terminate this Authorization and** the debits to my/our Account **only by giving East River written notice of termination**, delivered to East River's management office. Any termination by me/us will take effect as follows: Unless specially approved differently, East River must receive my/our termination notice by the 15th day of a month for the termination to take effect for the following month.

6. **Insufficient Funds in Account.** If there are insufficient funds in the Account to pay a debit entry, I/we will be responsible for any charges by East River's bank and/or by my/our bank, the Depository, as well as for the amount of the unpaid debit entry and for any amounts (including maintenance charges and late fees) due to East River under my/our proprietary lease and/or any other agreement with East River.

I/we have kept a copy of this Authorization.

NAME(S) _____ APT. NO. _____
(Please Print)
DATE _____, 20 _____ SIGNATURE _____
SIGNATURE _____