



**AUTHORIZATION AGREEMENT FOR AUTOMATIC DEBITS**

I hereby authorize **Community Association for Capri, Inc.** ("Association") to initiate monthly debits from my (select one):

Checking Account                      or                       Savings Account

in the amount of  **\$ 94.00** or  **\$ 99.00** per month. I understand that this amount will not change and is in full force until written notification is received by either myself (homeowner) or the Association. The withdrawal will occur on the 10<sup>th</sup> of each month, or the following business day. Monthly drafts from my account will begin \_\_\_\_\_ (MM/YYYY).

If for any reason my bank account number and/or financial institution changes, I must notify, in writing, the Association by the 5<sup>th</sup> of the month. If this is not done in a timely manner and the debit is returned (for any reason), I understand that I will be charged a \$25 penalty. Changes in account numbers and institutions require a new Authorization Agreement and a two (2) week processing period. During this time fees should be paid by check.

Homeowner: \_\_\_\_\_

Property Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Lot #: \_\_\_\_\_

Email Address: \_\_\_\_\_

Financial Institution: \_\_\_\_\_ Branch: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Transit/ABA Number: \_\_\_\_\_ Account Number: \_\_\_\_\_

*(Please ensure the above numbers are accurate and clearly written as rejected numbers may result in a fee)*

**Remit to:**  
**2801 SW Archer Road, Gainesville, FL 32608**  
[HOA@emmergroup.com](mailto:HOA@emmergroup.com)

HOMEOWNER SIGNATURE: \_\_\_\_\_

Date: \_\_\_\_\_