

Center City Residences

238 s 13th st Philadelphia, PA 19107 215-888-7681 215-875-1167 fax

Dear Resident,

In order to simply housing payments, the owner has implemented a program: "Worry-Free" Standard Rental Payments.

So that I do not have to worry about mailing a rent check each month, or the possibility of mailing the rent late and having to pay late charges, automatic bank drafts (ACH withdrawal) are available from my bank account to the rental owner/company.

Please find ACH Form in addition to this page. Please Turn in or email response to: centercityresidences@comcast.net

Your reply is appreciated and will be held in strict confidence. If you need to contact us via phone, we can be reached at **215-839-8125**. Thank you for your cooperation.

Thank you for your cooper-

Warm Regards,

The Management Team Center City Residences

http://centercityresidences.managebuilding.com/

Authorization for Automatic Transfer (ACH) -Electronic Banking

"Worry Free" Standard Rental Payments

Simplify your monthly rent payments & never pay late fees again!

Other method of rent payment which requires additional \$5.00 handling fee: Check __ Money order __

New Automatic Transfer			
Institution Name:	Dawn Fazio / David Sample / Center City Residences		
Name on Account:			
Financial Institution:			
Routing Transit Number:			
Account Number:			
Type of Account: (circle one)	Checking Savings		
Transfer (Limited to one payment per month, on due date or 1 st of each month)			

Please indicate one of the following payment options:

Transfer Information / Payment Options: (Limited to one payment per month)			
Payment Options (check one)	Transfer Amount		
Regular Monthly Rent Payment Amount	Specify rent amount per month \$	The regular payment will not be withdrawn from your account if your account is paid in advance. In that event, the regular payment will be withdrawn from your account on the next following payment due date.	
Regular Payment Plus Additional	Additional \$:		

I (we) authorize David Sample to make debit entries in the form of ACH transfers or other automatic transfers to the account identified above in the section entitled "Transfer From" for the purpose of completing the transfers described above. I (we) acknowledge that the origination of automatic transactions to my (our) account must comply with the provisions of U.S. Law and the Operating Rules of the National Automated Clearing House Association.

If the payment due date falls on a weekend or holiday, your payment will be credited as of the date due on the next business day. The payment amount will not vary. This authorization may be cancelled by sending written notice to David Sample, 238 s 13th St, Philadelphia, Pa 19107 or by calling (215) 888-7681. David Sample must be notified of cancellation at least 10 days prior to the payment due date. I (we) further acknowledge receiving a copy of this authorization.

Applicant Signature

X_____

Date