



Automatic eCheck Payments Form

Note to Owners: By filling out and signing this form, you are giving your permission to have your Quarterly HOA payment automatically transferred from your bank account to Egret Cove of Naples Homeowner Association, Inc.

Owner Name: _____

Property Address: _____

Recurring Payment Amount: \$ _____

Payment Start Date: _____

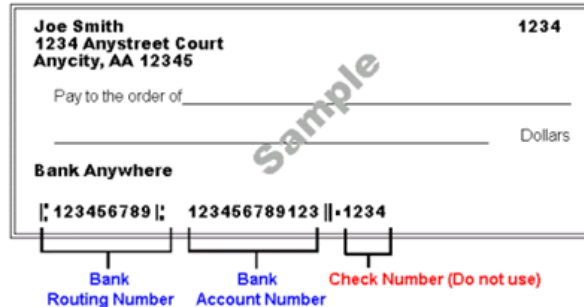
Frequency (check appropriate box):

- | | | | |
|---------------------------------|--|---|---|
| <input type="checkbox"/> Daily | <input type="checkbox"/> Every two weeks | <input type="checkbox"/> Every two months | <input type="checkbox"/> Every six months |
| <input type="checkbox"/> Weekly | <input type="checkbox"/> Monthly | <input type="checkbox"/> Quarterly | <input type="checkbox"/> Year |

Bank Routing #: _____

Account #: _____

Checking: Savings:



----- **Tenant Signature** -----

I hereby authorize Egret Cove of Naples Homeowner Association, Inc. to set up automatic recurring payments for the purposes of paying my Homeowner Assessments and associated fees.

Name: _____

Date: _____

Signature: _____