



"Your community is in our hands."

**COVENGTON SQUARE HOA
MANAGEMENT CO., LLC
3107 S. Evans St. Suite B Greenville, NC 27834
AUTHORIZATION AGREEMENT FOR DRAFTS**

Filed in Folder: _____ Entered into Bank: _____

New Draft: _____ Change Draft: _____ Stop Draft: _____

UNIT NUMBER: _____ EFFECTIVE DATE: _____ DUES TO DRAFT: _____

I (we) hereby authorize HOA MANAGEMENT CO., LLC to **draft \$190.00** against my account for the payment of **Covengton Square Association dues on the 15th day of each month. I understand that this authority shall remain in full force and effect until written notification is received from me of its termination in such time and in such manner as to afford the association a reasonable opportunity to act on it.** If I am notified that association dues are going to increase, I understand that my draft will automatically increase at the time listed in the notice.

OWNERS NAME (S): _____

MAILING ADDRESS: _____

BANK NAME: _____

BANK ROUTING NUMBER: _____

CHECKING ACCOUNT NUMBER: _____

SIGNATURE: _____ DATE: _____

If you have any questions or concerns on the drafting of dues, please contact Linda Price at 252-565-4820 or email lpricehoa@gmail.com

VOIDED CHECK MUST BE ATTACHED