

## ACH FORM

### Owner Information

First Name:		Last Name:	
Association Name:		Account or Lot #:	
Property Address:	City:	State:	Zip Code:
Email Address:		Phone Number:	

### Voided Check

*Attach Voided Check Here*

*I hereby authorize GRG Management, Inc., to credit or debit my bank account for my HOA charges*

### Owner's Signature

Signature:	Date:
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**PLEASE REMEMBER TO:**

1. Sign and date this form
2. Attach a voided check
3. Submit by the 15<sup>th</sup> to take effect in the next billing period
4. Keep a copy for your records
5. Return form and voided check to:

**GRG Management, Inc., PO Box 1186, Carlsbad, CA 92018-1186**

P.O. Box 1186, Carlsbad, CA 92018 ● 3088 Pio Pico Drive, Suite 200, Carlsbad, CA 92008