Association One-Time Payment (ACH) Authorization Form

Use this form to make a 'One-Time Payment' - 'Preauthorized Electronic Payment' Association Assessment.

- A separate form must be completed for each property/unit you are requesting a one-time payment.
- One-Time ACH requests are restricted to units with an <u>ACTIVE ACH AUTHORIZATION FORM</u> on file.
- Completed 'One-Time Payment Form' must be received by the **15**th of the month to take effect, on the **20**th of the same month. If the **15**th is on a weekend or a holiday, Bank OZK Association Services must receive this form by the last business day prior to the **15**th.
- By submitting this form you authorized Bank OZK to complete a one-time payment(ACH debit) for the below property/unit owner.

All Fields must be completed for One-Time Payment to take effect.

Management Com	ipany Name:			
Association Name	& Number:			
Unit Number:				
Unit Owner Name	:			
Routing/Transit Nu	umber:			
Account Type:	Checking	Savings		
Banking Account N	lumber:			
One-Time Paymen	it Amount \$:			
Payment Type:	Regular Assessment		Special Assessment	
	Maintenance		Other	
Management Con	npany Use Only:			
any and all liabilities, oblig	y and the Association agree to, and ations, losses, damages, penalties, a nay be imposed upon, asserted aga	actions, judgmen	ts, suits, costs, expenses, and/or	disbursements of any kind or
By Management/Agent	Authorization to 'One-Time De	bit' of Associat	tion Assessment ACH	Date Authorized
Reason For One-Ti	me Payment			
Bank OZK: Date	Acceptance	Verificatio	on Lockbox Ic	l Assn Id