



2851 S Parker Rd, Suite 840

Aurora, CO 80014

303-369-0800

CHANGE TO EXISTING REQUEST FORM

Dear Homeowner:

Thank you for taking advantage of ACH for payment of your HOA dues. If you need to change your information please fill out the bottom of this form and return it to Keystone at 2851 S. Parker Rd Ste 840, Aurora, CO 80014. **If you are not sure where to find your routing or account number we will fill that out for you from the information on the voided check that you are required to send.**

PLEASE RETURN A VOIDED BLANK CHECK, NOT A DEPOSIT SLIP WITH THIS FORM.

Payments will begin to be withdrawn from your account the month you indicate on the form as long as it is received no later than the 25th of the prior month.

ALL WITHDRAWALS WILL STILL OCCUR BETWEEN THE 4TH AND 8TH OF EACH MONTH – NO EXCEPTIONS!

Please let us know if you have further questions or need assistance.

Sincerely,
Keystone

AUTHORIZATION AGREEMENT FOR DIRECT DEPOSITS (ACH CREDITS)

CHANGE TO EXISING REQUEST

Community Association Name (This is NOT Keystone) _____

PROPERTY ADDRESS: _____

I (WE) HEREBY AUTHORIZE OUR HOMEOWNERS ASSOCIATION, HEREIN AFTER CALLED “COMPANY” TO INITIATE A MONTHLY CREDIT TRANSACTION IN THE AMOUNT OF OUR CURRENT MAINTENANCE FEE FROM MY/OUR ACCOUNT INDICATED BELOW AT THE BANK NAMED BELOW, HEREINAFTER CALLED “DEPOSITORY” TO CREDIT THE SAME TO SUCH ACCOUNT.

Depository (Bank) Name: _____

Branch: _____ City: _____ State: _____ Zip: _____

Routing #: _____ Account #: _____

Checking: Yes___ No___ (Check one) Savings: Yes___ No___ (check one)

Begin Automatic Withdrawal: Month _____ **Year** _____

THIS AUTHORIZATION IS TO REMAIN IN FULL FORCE AND EFFECT UNTIL TERMINATED, IN WRITING, BY EITHER THE HOMEOWNER OR “COMPANY”.

NAME(S): _____ PHONE _____

_____ PHONE _____

DATE: _____

SIGNED: _____ SIGNED: _____

PLEASE MAIL THIS FORM TO THE ADDRESS ON THE LETTERHEAD LISTED ABOVE