



Direct Deposit for Owners/Vendors

***Please Fax or Mail this form to your Property Management Company to be set up**

***Name of Management Company:** _____

Check One of the Following: **New Enrollment** **Add or Change Checking Account**

Company/Individual Name **Telephone #** **E-mail Address**

Address **City** **State** **Zip**

Bank Name **Routing Number (9 digits)** **Checking Account #**

Your Company, Inc.
1234 Street Address
YourCity, CA 38645 2400
91-548/1221

PAY TO THE ORDER OF _____ \$ _____
_____ **DOLLARS**

FOR _____

⑆ 22105278⑆ 6724301068⑆ 2400⑆

↑ ↑ ↑ ↑
Routing Number **Account Number** **Check Number** **Fractional Number**

***Please attach a voided check to top of check sample above. Please do not include Deposit slips**

I hereby authorize PayLease to deposit any amounts owed to me, as instructed by the Management Company listed above, by initiating credit entries to my account at the financial institution indicated on this form. In the event that PayLease deposits funds erroneously into my account, I authorize PayLease to debit my account for an amount not to exceed the original amount of the erroneous credit.

Owner/Vendor:

Print Name

Signature

Date

***Please Fax or Mail this form to your Property Management Company to be set up**