

## **Authorization Agreement**

I hereby authorize Steward Property Management to initiate automatic deposits to my account at the financial institution named below. I also authorize Steward Property Management to make withdrawals from this account in the event that a credit entry is made in error.

Further, I agree not to hold Steward Property Management responsible for any delay or loss of funds due to incorrect or incomplete information supplied by me or by my financial institution or due to an error on the part of my financial institution in depositing funds to my account.

This agreement will remain in effect until Steward Property Management receives a written notice of cancellation from me or my financial institution, or until I submit a new direct deposit form to Steward Property Management. Further, I understand that it is my responsibility to notify Steward Property Management if I fail to receive my monthly disbursement by the 16<sup>th</sup> of the month in the account listed below.

	Account Information	
Name of Financial Institution:		
Account Number:		□ Checking   □ Savings
	Signature	
Authorized Signature Primary:	Date	
Authorized Signature Joint:	Date	
Managed Property Address:		

Please attach a voided check or a copy of a check, (deposit slips are not accepted) and return this form to Steward Property Management. Thank you.