

Authorization Agreement for Automatic DEPOSITS

Company Name: Remy Management LLC - DBA: Coast Realty

Property Address State Zip Code City

I (we) herby authorize COAST REALTY hereinafter called Company, to initiate credit entries to my (our)
[X] Checking [] Savings account indicated below and the depository named below,

[X] Checking [] Savings account indicated below and the depository named below, hereinafter called **Depository**, to credit the same to such account

Depository Name (Bank Name)	Branch:
Name(s) : (Names on the Account)	

City	State	Zip
Routing Number:	Account Number:	

This authority is to remain in full force and effect until **Company** has received written notification from me (or either of us) of its termination in such time and in such manner as to afford **Company** a reasonable opportunity to act on it.

Legal Name:	EIN/Social Security/ Birth Date:	
Legal Name:	EIN/Social Security/ Birth Date:	

Signature	- Date	Printed Name
Signature	Date	Printed Name

Coast Realty • 804 Omni Blvd. Suite 200 Newport News, VA 23606 • Office: (757) 706-3865 / (757)655-6445

Please attach/email copy of voided check if possible. To double check the routing & account #'s.