Association Name: _____

Cancellation for Direct Debit (ACH) of Common Fees

I,_____, hereby request the Association above or its agent, as designated by its Board of Directors, to cease deduction of Common Fees from my bank account in compliance with the "Direct Deposit for Common Fees" policy of the Board, and as may be amended.

_____ _____
Signature Date

_____ _____
Printed Name Unit #

_____ _____
Bank Name Date to Cease Debit (MM/YYYY)

_____
Bank ABA Number (9 digit routing number)

_____ ☐ Checking Acct ☐ Savings Account
Account Number

Mail this form to:
PropertyWorx, LLC
896 Middlebury Road
Middlebury CT 06762
ATTN: Doreen Quell

OR

Email to:
doreen@propertyworx.com