



Alano Living  
P.O. Box 2327 - Lynnwood, WA 98036

alanoliving.com  
(425) 778-0000

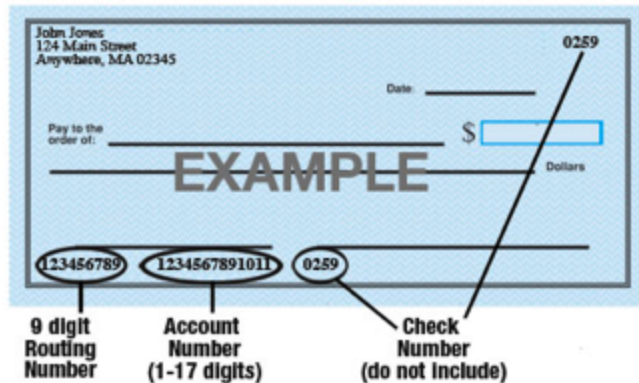
# ACH Credit / Debit Authorization Form

Please print and complete ALL the information below.

Name(s): \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_



Name of Bank: \_\_\_\_\_

Account #: \_\_\_\_\_

9-Digit Routing #: \_\_\_\_\_

Type of Account:    Checking    Savings    (Circle One)

**\*\* Please attach a voided check / slip for each account from which funds should be debited.**

I (we) hereby authorize Alano Living to debit / credit the account listed above and, if necessary, initiate adjustments for any transactions credited / debited in error. This authority will remain in effect until Alano Living is notified by me (us) in writing to cancel it in such time as to afford Alano Living and the financial institution a reasonable opportunity to act on it. I understand and agree that the amount of the debit will be my monthly rent plus any additional fees as agreed in my lease agreement.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_