



JDH Association Management, Inc.

## AUTOMATIC DRAFT APPLICATION

### PAYOR INFORMATION

First Name : \_\_\_\_\_ Middle Initial: \_\_\_\_\_ Last Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Driver License: \_\_\_\_\_ Driver State: \_\_\_\_\_

### BANK INFORMATION

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

ABA Routing Number: \_\_\_\_\_ Accounting Number: \_\_\_\_\_

Account Class:  Personal  Commercial

Account Type:  Checking  Savings

Property Address: \_\_\_\_\_  Monthly Maintenance Assesement: \_\_\_\_\_

**PLEASE ENCLOSE A COPY OF A VOIDED CHECK  
WITH THIS PRINTED COMPLETED FORM.**

Total Monthly Draft: \_\_\_\_\_

### DRAFT AUTHORIZATION

I have read and accept the Terms of Automatic Draft.

The information provided by me on this form is correct and accurate.

I allow \_\_\_\_\_, to draft monthly from my account.

*name of association*

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

JDH Association Management, Inc.

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