## Kentucky Realty Corporation

3944 Bardstown Rd. Louisville, Kentucky 40218 (502) 473-0003 Fax: (502) 473-7269

## **AUTHORIZATION FOR AUTOMATIC PAYMENT**

I authorize Kentucky Realty Corporation and the financial institution named below to initiate entries to my checking / savings accounts. This authority will remain in effect until I notify you in writing to cancel it in such time as to afford the financial institution a reasonable opportunity to act on it. I can stop payment of any entry by notifying my financial institution (3) days before my account is charged. I can have the amount of an erroneous charge immediately credited to my account up to (15) days following issuance of my financial institution statement or (60) days after posting, whichever occurs first.

Name of financial institution

Traine of imalicial institution	· ·	
Checking account number_		
Savings account number		IF FUNDS ARE DRAWN AGAINST SAVINGS ACCOUNT
Financial institution routing	g number	
(between these symbols :	on the bottom left side of your	check)
( A VOIDED	CHECK MUST ACC	OMPANY THIS FORM )
NAME OF		
COMPLEX	ADDRESS_	
TELEPHONE NUMBER	·	
	MONTH TO STA	ART AUTOMATIC PAYMENT
·	the authorization for payment o	ic entries to my checking / savings accoun f my monthly maintenance fees to be
Signature	Name	