



ACH DIRECT DEPOSIT AUTHORIZATION AGREEMENT

Please complete this form and return to our office **with a voided check**, to ensure accuracy in setting up your direct deposit account. You may return by mail, fax or e-mail to the following:

HRW Realty Corp
5540 McNeely Drive
Suite 204
Raleigh, NC 27612

Office: 919-783-1855
Fax: 919-256-5051
e-mail: Team@HRWRealty.com

I hereby authorize HRW Realty Corp, to initiate credit entries or such adjusting entries, either debit or credit which are necessary for corrections, to my Checking account _____ or Savings account _____ and the financial institution named below to credit (or debit) the same to such account.

FINANCIAL INSTITUTION NAME **CITY** **STATE**

TRANSIT/ROUTING NUMBER **ACCOUNT NUMBER**

This authority is to remain in full force and effect until HRW Realty Corp has received 2 weeks written notification to terminate the direct deposit service.

NAME

SIGNATURE **DATE**