



Hoffman Realty, LLC

3900 W. Dale Avenue, Tampa, Florida 33609

Electronic Funds Transfer (EFT) Authorization Form for Landlords

COMPANY
NAME ID: HOFFMAN REALTY, LLC

COMPANY TAX ID
NUMBER: 59- 3710439

I (we) hereby authorize Hoffman Realty, LLC, hereinafter called COMPANY, to initiate EFT credit entries, and to initiate, if necessary, debit entries and adjustments for any EFT credit entries in error, to my (our) ___checking ___savings account (select one) indicated below, hereinafter called DEPOSITORY, per the terms of my (our) Exclusive Rental Management Agreement.

DEPOSITORY NAME: _____ BRANCH: _____

CITY: _____ STATE: _____ ZIP: _____

TRANSIT/ABA NO: _____

ACCOUNT NO: _____

LANDLORD'S TAX ID NUMBER: _____

DRIVER'S LICENSE NUMBER: _____ STATE: _____

This authority is to remain in full force and effect until COMPANY has received written notification from me (or either of us) of its termination in such time and in such manner as to afford COMPANY and DEPOSITORY a reasonable opportunity to act on it. I (we) also hereby warrant to COMPANY that I (we) have full legal authority to authorize EFT transactions to the account listed above, and I (we) acknowledge that the origination of EFT transactions to my (our) DEPOSITORY must comply with the provisions of U.S. law governing such transactions.

NAME(S): _____
(Please print)

DATE: _____ SIGNED X: _____

DATE: _____ SIGNED X: _____

Please write "VOID" across one of your checks and return to us with this Authorization Agreement.

In order for your funds to be directly deposited to your account, this form must be received by our office no later than two weeks prior to your first electronic funds transfer. No exceptions.