



BRICKYARD COVE MARINA

1120 Brickyard Cove Road, Pt. Richmond, CA 94801
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AUTHORIZATION AGREEMENT FOR PREAUTHORIZED PAYMENTS

I (we) hereby authorize **Brickyard Cove Marina**, hereinafter called **COMPANY**, to initiate debit entries to my (our) account(s) indicated below at the depository financial institution indicated below, hereinafter called DEPOSITORY for the purpose of monthly rent payments and, if necessary, adjustments for any entries in error to my account(s) indicated below to credit and/or debit the same to such account(s). I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of U.S. law.

Tenant Information

Name(s): _____ Date: _____
Slip# _____

Bank Information

Bank Name _____
Name on _____
Account: _____
Routing _____
Number: _____

Account Type: Checking Savings Other _____
Account Number: _____

Monthly payment summary:

Berth Rental	Slip #	_____	_____
Dry Storage Rental	Space#	_____	_____
Storage Unit Rental	Unit #	_____	_____
Liveaboard Fee		_____	_____
Office Space		_____	_____
Other		_____	_____
Other		_____	_____
TOTAL MONTHLY AMOUNT			\$

Payments will be processed on the 7th of each month. If the 7th falls on a holiday or weekend, the payment may not be processed until the next business day.

This authority is to remain in full force and effect until **COMPANY** has received written notification from me of its termination in such time and in such a manner as to afford COMPANY and Depository a reasonable opportunity to act on it.

Your Name (Please print legibly)

Signature

Date

NOTE: PLEASE ATTACH A VOIDED CHECK FOR EACH DEPOSITORY (BANK) ACCOUNT LISTED ABOVE.

RETURN ITEMS SUBJECT TO \$25 FEE