

MAUSHOP VILLAGE CONDOMINIUM TRUST 3A

**ACH BANKING
(AUTO DEBIT)**

OWNER NAME: _____

MAILING ADDRESS: _____

UNIT ADDRESS: _____

CONDO FEE: _____

BANK NAME: _____

ROUTING #: _____

ACCOUNT #: _____

Please return completed form and a *copy of a blank or voided check* to:

Mercantile Property Management
P.O. Box 790
Buzzards Bay, MA 02532

PLEASE BEGIN AUTO DEDUCTION AS OF THE MONTH OF _____.

**(THIS PROCESS NORMALLY TAKES 30 DAYS FROM RECEIPT OF YOUR
FORM TO PROCESS)**

Thank you.