

## **PARK Roanoke**

P.O. Box 83 Roanoke, VA 24002 117 Church Ave., SW, Roanoke, VA 24011 (540) 343-0585 · (540) 342-6447 FAX Email: parking@parkroanoke.com

www.PARKRoanoke.com

## **AUTOMATIC BANK DRAFT AGREEMENT**

Name:		
Address:		
City:	State:	Zip Code:
Telephone Number:	Cellular Numbe	r:
Bank Name:		
Routing Number:	Account Number	er:
The monthly payment to PARK Roanoke will be debited from the above account on the 1 <sup>st</sup> of every month, until further notice from customer in writing, stating otherwise. If the funds are not available at the time of the debit, the customer is subject to both an insufficient funds fee and a late fee.		
Signature:	Dat	e:
FOR OFFICE USE ONLY		
Account Number:		
Amount to be Drafted:		
Amount to be Drafted:  Location:		

Attach a voided check here. Agreements cannot be processed without a voided check. Do not attach a deposit slip.