



Direct Deposit for Owners

Please complete this form in order to receive Owner Distribution Pmts

***Name of Management Company:** METRO RESIDENTIAL LLC

Check One of the Following:

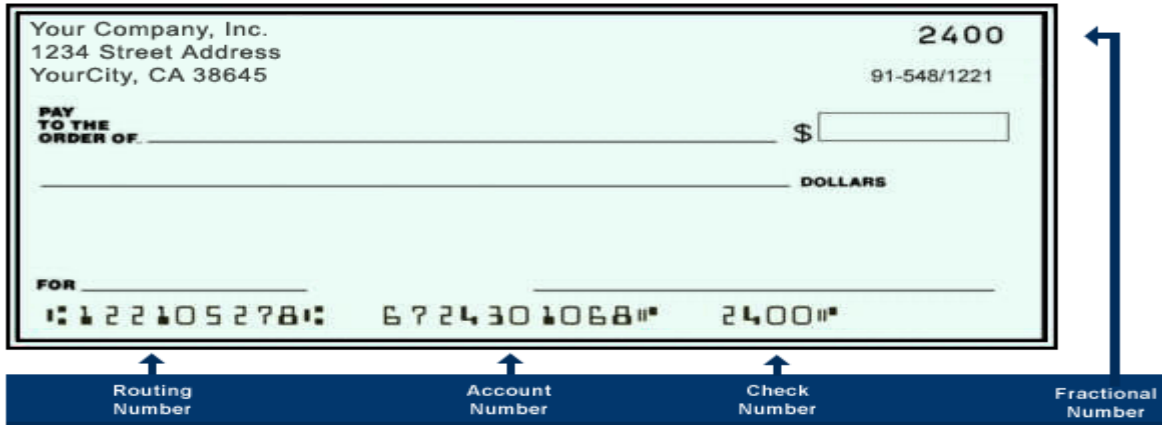
New Enrollment

Add or Change Checking Account

Company/Individual Name **Telephone #** **E-mail Address**

Address **City** **State** **Zip**

Bank Name **Routing Number (9 digits)** **Checking Account #**



I hereby authorize PayLease to deposit any amounts owed to me, as instructed by the Management Company listed above, by initiating credit entries to my account at the financial institution indicated on this form. In the event that PayLease deposits funds erroneously into my account, I authorize PayLease to debit my account for an amount not to exceed the original amount of the erroneous credit.

Owner/Vendor:

Print Name

Signature

Date
