

**TELLURIDE MOUNTAIN VILLAGE  
OWNERS ASSOCIATION**

**AUTOMATIC DIRECT DEBIT BILLING REQUEST**

**SELECT ONE:                      QUARTERLY                      ANNUAL**

I (we) \_\_\_\_\_ hereby authorize Telluride Mountain Village Owners Association (TMVOA) to initiate a charge to my (our) bank account. This authority will remain in effect until notified by me (us) in writing to cancel.

\_\_\_\_\_  
Bank name and address

\_\_\_\_\_  
Bank routing number (9 digits) and account number

\_\_\_\_\_  
Customer signature and date

\_\_\_\_\_  
Account name (please print) – as it appears on check

\_\_\_\_\_  
Owner's billing address

\_\_\_\_\_  
Telephone Number (including area code)

\_\_\_\_\_  
TMVOA account number(s) (Please enter all account #s that should be drafted.)

*Please fill out form completely and FAX to:*

**TMVOA**

**Fax: 970-369-7656**

*If you have any further questions or are in need of assistance, please contact*

**Louise LaBranche Email: [louise@tmvoa.org](mailto:louise@tmvoa.org) or Phone: 970-728-1904 x 5**