



Authorization for Prearranged Bank Draft Payments

Name

Billing Address

City

State

Zip Code

Phone

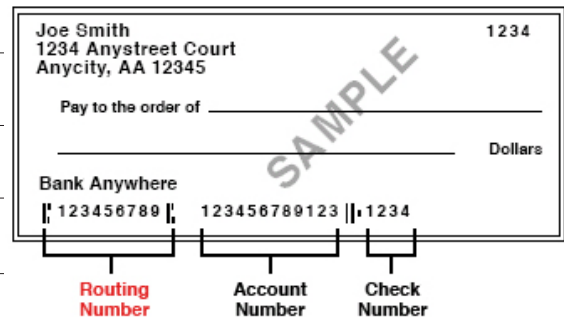
Name of Bank

Bank City

Bank Routing No.

Checking Account No.

Name as Shown on Bank Account



In consideration of this service to the extent permitted by applicable law, I hereby release and hold harmless Pine Valley for all claims of liability, whether caused or contributed to by negligence of Pine Valley with respect to the debit of my account. In no event will Pine Valley be liable for the acts and omissions of others, including the bank and clearing houses that receive and transmit the debit instructions.

AUTHORIZATION AGREEMENT FOR PREARRANGED BANK DRAFT PAYMENT

I hereby authorize Pine Valley, as my agent, to debit my bank account for payment of all bills rendered by Pine Valley. I understand that these debits will occur 10 days after the rendered date of the service bill with the exception of the final bill which may be drafted immediately. I also understand that I must notify Pine Valley promptly upon receipt of my bill of any dispute regarding the amount of my bill.

I understand that Pine Valley may impose a processing fee if the draft is not paid by my bank due to insufficient funds or my account being closed. This authorization will be in effect until either party gives written notice to the other of termination. I understand that my notice must be received by Pine Valley in time for it to have a reasonable opportunity to act. After several failed attempts at processing the draft, Pine Valley retains the right to discontinue the remitting of said drafts.

Signature

Date

IMPORTANT: Please enclose a voided check.

Please mail completed form and voided check to:

Pine Valley Turf Management & Design
8410 Pit Stop Court,
Suite 132
Concord NC, 28027