

Direct Deposit Enrollment Form

Complete and return to Kasteel Property Management for immediate processing.
Processing will take a one month cycle so your first payment may be mailed to you.

Start
 Change_____

First Name:_____ Last Name:_____ MI:_____

Address 1:_____

Address 2:_____

City:_____ State:_____ Zip Code:_____

Telephone: (_____) _____ - _____

Please list the account number without dashes or other characters in ONE of the account type fields below.

Savings _____

Money Market _____

Checking _____

PLEASE INCLUDE A VOIDED CHECK

Type of deposit: Full Pay

Depositor:
Kasteel Property Management, LLC
354 Sweetwater Dr
Springville, UT 84663

Account Holder Signature: _____ Date: _____