

Authorization Agreement for Direct Payments (ACH Debits)

I (we) hereby authorize Top Premium Finance hereinafter called COMPANY, to initiate debit entries to my (our):
Account Type:
indicated below at the depository financial institution named below, hereinafter called DEPOSITORY, and to debit the same to such account.
Depository Name:
Routing Number:
Account Number:
This Authorization is to remain in full force and effect until COMPANY has received written notification from me (or either of us) of its termination in such time and in such manner as to afford COMPANY and DEPOSITORY a reasonable time to act on it.
I understand that if the transaction is rejected/returned by my financial institution, for any reason (including NSF), a \$15.00 return check fee will be due, and added to your balance. I further grant permission to debit the return item fee electronically in same manner as payment.
Name(s):
Date:
Signed X: Signed X:
Note: All written authorization must provide that the receiver may revoke the authorization only by notifying the originator in the manner specified in the authorization
Attach Voided Check Here
(Tape Voided Check Here)
DO NOT STAPLE!