



# ACH LOAN PAYMENT AUTHORIZATION

Page 2 of 3

## PART 3: Loan Payment Information

Please select one of the following payment options. If no selection is made, the default will be **Recurring monthly payments of exact amount billed** beginning on the next payment due date. This completed and signed ACH Loan Payment Authorization must be received by Bank at least three (3) business days before the payment due date to allow for processing.

One-time ACH of: \_\_\_\_\_ Regular Payment Principal Payment  
Dollar Amount

Note: If no selection is made, the default will be Regular Payment.

Recurring monthly payment of exact amount billed beginning on the next payment due date<sup>1</sup>.

Recurring monthly payment of exact amount billed plus \_\_\_\_\_ additional principal each month to begin on the next payment due date<sup>1</sup>.  
Dollar Amount

Fixed recurring monthly payment of \_\_\_\_\_ to begin on the next payment due date<sup>1,2</sup>.  
Dollar Amount

1. Any past due amounts will be processed with the first payment.

2. I understand that should the monthly interest accrual exceed this amount, the full amount billed will be deducted from my external bank account.

Note: The ACH transaction will be initiated to settle on the same date as the payment due date referenced on your monthly loan statement. There may be a delay for ACH transactions initiated to payoff and close a loan. ACH limits are established at the Bank's discretion.

## PART 4: Signature

The individual signing below must be an Authorized Signer on **both** of the accounts listed in PART 1 and PART 2. Electronic signature through DocuSign® is acceptable if initiated by a Bancorp representative. Please contact us to get started.

\_\_\_\_\_  
Signature of Authorized Account Signer

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date (mm/dd/yyyy)

Please **mail or fax** this completed form to:

cfb Banking Services, Attn: Loan Department

409 Silverside Road, Suite 105, Wilmington, DE 19809

Fax: 302.791.5610

Phone: 877.226.2928

**PLEASE RETAIN A COPY OF THIS FORM FOR YOUR RECORDS.**

## FOR BANK USE ONLY

\_\_\_\_\_  
Date Received (mm/dd/yyyy)

\_\_\_\_\_  
Date ACH Set-up Completed

\_\_\_\_\_  
Processed by

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Page 3 of 3

## **Your right to revoke your authorization and the procedure for doing so.**

If you have authorized the Bank to make regular ACH transfers from your account at another Financial Institution, you can revoke your authorization by providing the Bank with a written and signed request at least three (3) business days before the transfer is scheduled to be made. The request should be mailed or faxed to the Bank using the contact information listed in PART 4 above.

## **Notice of varying amounts.**

If your regular loan payments vary in amount, we will inform you in your monthly loan statement, at least 10 days before each transfer, how much it will be and when it will be made.