CONSUMER ACH AUTHORIZATION FOR DIRECT PAYMENTS VIA ACH (ACH CONSUMER DEBITS)

Company Name	Company ID Number
I (we) authorize ("COMPANY"), to electronically debit my (our) account (and, if necessary, electronically credit my (our) account to correct erroneous debits¹), as follows: □ Checking Account / □ Savings Account (select one) at the depository financial institution named below ("DEPOSITORY"). I (we) agree that ACH transactions I (we) authorization comply with all applicable law.	
Depository Name	
Routing Number	Account Number
Amount of debit(s) or method of determining amount of debit(s) [or specify range of acceptable dollar amounts authorized]:	
Date(s) and/or frequency of debit(s):	
I (we) understand that this authorization will remain in full force and effect until I (we) notify COMPANY [insert manner of revocation, i.e. in writing, by phone, location, address, etc.] that I (we) wish to revoke this authorization. I (we) understand that the COMPANY requires at least [X days/weeks] notice in order to cancel this authorization. ²	
Name(s) (Please Print)	ID Number
Date	Signature

The NACHA Operating Rules do not require the consumer's express authorization to initiate reversing entries to correct erroneous transactions. However, Originators should consider obtaining express authorization of debits or credits to correct errors.
 Written debit authorizations must provide that the Receiver may revoke the authorization only by notifying

² Written debit authorizations must provide that the Receiver may revoke the authorization only by notifying the Originator in the time and manner stated in the authorization. The references to notification should be filled with a statement of the time and manner that notifications must be given in order to provide company a reasonable opportunity to act on it (e.g. "In writing by mail to 100 Main Street, Anytown, NY that is received at least three (3) days prior to the proposed effective date of the termination of the authorization").