



Authorization for Automatic Payment

Borrower Information

| | |
|------------------|--|
| Name(s) | |
| Loan Number | |
| Property Address | |

Banking Information

☐ New Automatic Transfer ☐ Change to Transfer ☐ Cancel Existing Transfer

| | | |
|-----------------------|---|---|
| Transfer From: | <input type="checkbox"/> Checking <input type="checkbox"/> Savings | |
| | Routing Transit Number (9-digit number on the bottom left of your check) | Account Number (to the right of the bank routing number on your check) |
| | | |
| | Customer Name(s) | |
| Institution Name | | |

Transfer Information/Payment Options

| Payment Options | Additional Payment Information |
|--|--------------------------------|
| <input type="checkbox"/> Regular payment | |
| <input type="checkbox"/> Regular Payment plus additional principal | Additional principal \$ |

*If the loan is escrowed, is an interest only loan, or is an ARM loan and there is a change in the monthly payment, the new amount plus any additional principal as indicated above, will be the amount debited.

Payment Draft Date (* **PLEASE SEE CRITERIA ATTACHED BEFORE SELECTING**) _____

The month that I would like the drafting to begin is: _____



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***Payment selection date can only be on the date the monthly payment is due or within the Grace period of the due date, not to exceed 15 days past due date.** (IE: *Loan due date is on the 1st with a 10 day grace period, you can select any date between the 1st and the 10th.* Loans due on the 5th with a 15-day grace period can select any date between the 5th and the 20th.)

AmeriNat must receive this form at least 3 full business days prior to the draft date requested. AmeriNat will notify you in writing of the effective date of the draft. Until you receive notification, please continue to mail your payments to AmeriNat. Accounts that are current are eligible for the automatic payment option.

Once you sign up, AmeriNat will automatically deduct the loan payment from your checking or savings account on the date selected (if the date is on a holiday or weekend, the deduction will be the following business day). If a draft date is not indicated, the payment date will be used. You may choose a date up to 10 days past your due date.

Return the complete authorization for payment form via email to customerservice@amerinatls.com, mail to 217 S. Newton Ave., Albert Lea, MN 56007, or fax to (562) 745-1281. The automatic payment service can be cancelled by sending a written request 7 business days prior to your next scheduled draft date.

I (we) hereby authorize AmeriNat, and its successors, assigns, authorized agents or any entity servicing the loan on their behalf (hereinafter called the Servicer) to initiate loan payment debit entries to my (our) Checking or Savings Account indicated above, and the depository named above to debit the same to such account. I (we) understand that if any debit entries under this authorization are returned for insufficient funds (NSF) or otherwise dishonored, I (we) will promptly send the Servicer the total monthly payment due, plus any late charge(s) or other fees due under the loan. I understand that if I incur 3 insufficient fund returns in a 12-month period, my automatic payment service may terminate.

This authorization is to remain in full force and effect until the Servicer has received written notification from me (us) of its termination in such time and in such manner as to afford the Servicer a reasonable opportunity to act upon it; at least 7 days before my draft date. Servicer may terminate this agreement with written notice provided to me.

(Print) Borrower First and Last Name

(Signature)

Date

(Print) Bank Account Holder First and Last Name

(Signature)

Date