



Automatic Loan Payment Authorization

New Change to Existing Cancel

Section 1: TAPCO Account Information

Name _____

Member Number _____ Loan Number _____ Today's Date _____

Section 2: New Request

Payment Method (SELECT ONE)

NOTE: Annual Percentage Rate is 0.25% lower for loans set to an Automatic Transfers from a TAPCO account.

Monthly Statement (cash payments)

Automatic Transfer from my TAPCO account – select one: Savings Checking

Debit from my account at another financial institution - *Request must be received at least 7 days prior to first payment*

Other Institution Information

Name of Financial Institution _____ Payment Amount \$ _____

Account No. _____ Routing No. _____ Account Type: Savings Checking

Frequency: Monthly _____ Weekly _____ Twice a Month _____ & _____
Date Day of Week Date Date

Section 3: Change to Existing (SELECT ALL THAT APPLY)

Change Date of Month From: _____ To: _____
Date Date

Change Amount \$ _____

Change Frequency

Monthly _____ Weekly _____
Date Day of Week

Twice a Month _____ & _____
Date Date

Change Account to be Debited

Name of Financial Institution _____

Account Type: Savings Checking

Account No. _____

Routing No. _____

Section 4: Cancellation Request (Complete this section to cancel your current ACH Direct Transfer)

Date of Current Payment _____

Amount of Payment \$ _____

Name of
Financial Institution _____

I/We request that TAPCO cancel my/our ACH
Direct Transfer payment as of _____.

Section 5: Authorization

By signing below I/we agree: a) to make payments by the method I/we selected above. I/we authorize TAPCO Credit Union (TAPCO) to make my/our recurring payments for my/our loan. If the required payment changes for any reason, I/we agree that this authorization will be automatically amended to authorize the debit of an amount equal to the new required payment, b) that if the funds are not available in my/our account on the transfer and/or debit date, I/we will have to pay a Non-Sufficient Fund fee as disclosed in the Fee Schedule, c) that any scheduled ACH debit or automatic payment transfer that falls on a weekend or holiday will occur on the first business day following, d) TAPCO may cancel the ACH debit agreement if a preauthorized ACH debit is returned three (3) times within a twelve (12) month period, and e) this authorization will remain in full force and effect until TAPCO receives written notification from me/us of its termination at least 5 days prior to the next scheduled due date, or in a manner and time frame giving TAPCO a reasonable opportunity to act on it. .

Signature _____

Date _____

FOR CREDIT UNION USE ONLY

Date Received _____ Employee Initials _____ APG Added/Removed Delivered to ACH Department