

**Pre-authorized Payment (Debit) Service Authorization Agreement**

Veterans' Home Purchase Board

Company Name \_\_\_\_\_

Loan Number \_\_\_\_\_

I (We) authorize the above COMPANY and the financial institution listed below to electronically debit my (our):

Checking Account

Savings Account

Bank Name \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

ZIP Code \_\_\_\_\_

Bank Transit/Routing Number \_\_\_\_\_

Bank Account Number \_\_\_\_\_

This authority is to remain in full force and effect until COMPANY and BANK have received written notification from me (or either of us) of its termination in such time and in such manner as to afford COMPANY and BANK a reasonable opportunity to act on it. A copy of this Authorization Agreement must be given to the customers and will be provided by COMPANY, upon request, to the BANK.

Borrower's Name (Please Print) \_\_\_\_\_

Co-Borrower's Name (Please Print) \_\_\_\_\_

Signature \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

**Please attach to this form a voided check.**