



For Office Use Only	
Date Entered:	
Entered By:	
Validated By:	

**ACH (Automated Clearing House) Origination Authorization Agreement for
Payment (ACH Debits) or Deposits (ACH Credits)**

I understand that I must be listed as an Account Holder on both the Ent account and on the account at the Receiving Financial Institution in order to enter into this ACH origination agreement.

Part 1: Your Account Information With Ent Credit Union	
Account Holder's Name:	
Telephone Number:	
Email Address:	
Ent Account Number:	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Loan

Part 2: Your Account Information at Your Other Financial Institution	
Financial Institution's Name:	
ABA/Routing and Transit Number:	
Account Holder's Name:	
Account Number:	
Account Type:	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Loan
Please indicate what type of transaction you would like to initiate (Select only one option) <input type="checkbox"/> I want to initiate a withdrawal from this external account to post as a deposit or loan payment to my Ent account listed above. <input type="checkbox"/> I want to initiate a deposit to this external account to post as a withdrawal from my Ent account listed above. <input type="checkbox"/> I want to initiate a loan payment to this external account to post as a withdrawal from my Ent account listed above.	

Part 3: Transfer Amount & Frequency	
Amount:	\$ _____
First Transfer Date:	____ / ____ / ____ Semi-monthly (Twice a month)
<input type="checkbox"/> Monthly <input type="checkbox"/> End of Month	Transfer Day 1: ____ Transfer Day 2: ____ (Enter 31 in Transfer Day 2 for End of Month)
<input type="checkbox"/> Weekly	<input type="checkbox"/> Bi-weekly (Every two weeks)

I understand this agreement authorizes Ent to initiate debit and/or credit entries to the Receiving Financial Institution. I understand that establishing the Automated Clearing House (ACH) method may take up to 30 days after Ent has received this signed form. If used for loan payments I am responsible for making payments until the ACH takes effect.

I agree that if any debit entry is dishonored Ent shall have no liability. I also agree that any dishonored debit entry shall be subject to the current returned fee as disclosed in the Ent Fee Schedules available at any service center or on our website: Ent.com. I agree to pay any costs or fees assessed by Ent as a result of processing items in accordance with this agreement.

This authorization will remain in effect until Ent has received written notice from me of my intent to terminate the agreement in such time and such manner to afford Ent and the Receiving Financial Institution reasonable opportunity to act on the termination request. I agree that the origination of ACH transactions to my account must comply with the provisions of U.S. law. Ent has the right to terminate this authorization at any time. If the ACH entry is posted directly to a loan, this agreement will automatically terminate upon the payoff of the loan.

Ent may give you credit for Automated Clearing House (ACH) payments before it receives final settlement of the funds transfer. Any such credit is provisional until Ent receives final settlement of the payment. You are hereby notified and agree, if Ent does not receive such final settlement, that it is entitled to a refund from you of the amount credited to your account in connection with that ACH entry.

ACH transactions are governed by operating rules of the National Automated Clearing House Association. In accordance with these rules, Ent will not provide you with next day notice of ACH credit transfers to your account. You will continue to receive notices of receipt of ACH items in the periodic account statements which Ent provides. You may also verify transfers to your account by calling us directly at (719) 574-1100, 800-525-9623 or through the use of Online Banking at Ent.com.

Note: Credit/Debit Authorizations must provide that the receiver may revoke the authorization only by notifying the originator in the manner specified in the authorization.

I hereby authorize Ent Credit Union ("Ent"), 7250 Campus Drive, Colorado Springs, CO 80920 to initiate ACH Debits and/or ACH Credits from/to my Ent account and my external account named above.

Member's Signature:	Date:
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Please attach a voided check from your other Financial Institution.