



LINE OF CREDIT AUTOPAY AUTHORIZATION AGREEMENT

Yes, I would like to have my Utilities Employees Credit Union (UECU) loan payment made automatically.

Name: _____ UECU account number: _____

Loan number: _____

Select one of the following account source options:

- Payment from UECU Checking # _____
- Payment from UECU Savings # _____
- Payment made from another financial institution. I hereby authorize UECU to initiate the electronic transfer of my payment from my account at the Financial Institution named below.
Financial institution _____ ABA/Transit Routing number _____
City _____ State _____ Zip _____ Account name _____
Select one: Checking Savings Account number _____

Select one of the following monthly payment options:

- Minimum payment (greater of 1.5% of Principal Balance or \$50)
- Fixed amount: \$ _____ or minimum payment due, whichever is greater.

Payment will be made on the 25th of the month following your statement date.

It is understood and agreed that: This authority is to remain in effect until UECU receives written notification from me of revocation in such time and manner as to afford a reasonable opportunity to act on termination. Notifications can be made to UECU via fax (610-927-4059) or mail to: PO Box 14864, Reading, PA 19612-4864. I further understand that UECU or my financial institution reserve the right to terminate AutoPay and/or my participation in it at any time. Available funds sufficient to cover the payment amount must be in the account named above on the payment date.

Signature _____ Date _____
Home phone _____ Work phone _____
Email address _____



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