



ACH DEBIT AUTHORIZATION

Bridge Credit Union makes it easy for you to pay your loan with our Automatic Payment program. Loan payments can be debited from your checking or savings account at the bank or credit union of your choice.

All payments are applied directly to your loan account on the posting date selected, and will automatically be credited towards your loan balance. Also, payment confirmations and reminders can be emailed to you for every transaction if you wish to provide your email address.

Bridge Credit Union's loan payment service utilizes the latest security and encryption standards to ensure that your payment information is secure and kept confidential. The automatic payment program meets all NACHA and PCI requirements for secure transaction processing.

For details or assistance, call 800.434.7300

BORROWER INFORMATION

<input type="text"/>		<input type="text"/>	
NAME		BIRTH DATE	
<input type="text"/>		<input type="text"/>	
PHONE NUMBER		E-MAIL (OPTIONAL)	
<input type="text"/>			
STREET ADDRESS		CITY	STATE
			ZIP

LOAN INFORMATION

<input type="text"/>	<input type="checkbox"/> AUTO LOAN	<input type="checkbox"/> PERSONAL LOAN
BRIDGE CREDIT UNION LOAN NUMBER(S)	<input type="checkbox"/> HOME EQUITY LOAN	<input type="checkbox"/> CREDIT CARD

PAYMENT INFORMATION

DEDUCT MY PAYMENTS FROM:

CHECKING ACCOUNT - Please attached a voided check (if available)
 Account # _____ Bank/Credit Union Routing # _____ (nine digit number)

SAVINGS ACCOUNT
 Account # _____ Bank/Credit Union Routing # _____ (nine digit number)

PAYMENT AMOUNT (choose one):
 Scheduled Payment Amount Other Amount \$ _____

PAYMENT FREQUENCY (choose one):
 Monthly Bi-Weekly

PAYMENT DATE (choose one):
 Scheduled Due Date Other _____

BORROWER AUTHORIZATION

I hereby authorize Bridge Credit Union to debit my checking/savings account or credit/debit card for my scheduled loan payment(s). I have ownership of the checking/savings account or credit card that I provided. This authorization will remain in effect until I have notified and directed you to terminate the automatic payment program and allowing you reasonably to act upon my request. I understand there may be fees charged to my checking/savings account in the event of an overdraft, and agree to pay all fees charged for using the program. I agree to any payment convenience fees charged, as disclosed by Bridge Credit Union.

X	
BORROWER SIGNATURE	DATE

Bridge Credit Union, Inc.