



Automatic Payment Authorization

- New
 Change

___ HFH Family
 ___ HRP Family

HOMEOWNER	
Name:	
Address:	
City:	Zip:
Daytime Phone:	

BANK ACCOUNT INFORMATION

Type of Account (please check one):

- Checking
 Savings

Bank Name:	
Bank ABA/Routing # (9-digits): <small>Valid Routing # must start with 0, 1, 2 or 3</small>	Bank Account #: <div style="text-align: center; margin-top: 5px;"> </div>

Frequency:
 Weekly (52)
 Every Other Week (26)
 Bi-Monthly (24)
 Monthly (12)

Amount:
Start Date(s):

If an auto payment is pulled when your account does not have enough money in it, a non-sufficient funds (**NSF fee of \$10**) will be charged. The homeowner must pay this additional \$10 NSF fee with the mortgage payment by check or money order. If paid after the grace period a late fee will also be applied.

This authorization will remain in effect until cancelled by either party.

I hereby authorize Habitat for Humanity to electronically draw funds as indicated above.

I further understand that Habitat for Humanity will notify me in writing of changes to my monthly mortgage payment. Most mortgage adjustments occur annually due to changes in property taxes and/or homeowner's insurance and take effective February 1st. I authorize Habitat for Humanity to adjust my automatic payment(s) accordingly.

Signature: _____ Date: _____

Signature: _____ Date: _____