

External ACH Authorization for Loan Payments

This form is used when you want to request that Horizon Bank debit an account at another banking institution for your monthly loan payment.

HORIZON BANK LOAN	INFORMATION			
Borrower Name(s):		Prima	Primary SSN:	
Address:				
Home or Mobile Phone #:		Business P	Business Phone:	
Horizon Bank Loan Numbe	er to be Credited:			
Payment Amount:		Frequency:		
Beginning Date:		Ending Date:		
ACCOUNT DEBIT INFO	DRMATION			
Account (check one) indicat	ed below at the depos the same to such acco	itory financial institution na unt. I (we) acknowledge th	or) ☐ Checking Account / ☐ Savings amed below, hereinafter called at the origination of ACH transactions	
Depository Institution Nan	ne:			
City:		State:	Zip:	
Bank Phone #:	Name(s)	Name(s) on Account:		
Bank Routing Number:		Bank Account Number:		
(or either of us) for its terr reasonable opportunity to	mination in such a man eact on it. (<i>If this is a jo</i>	ner as to afford Horizon Ba int account, both signers m	receives written notification from me ank, SSB and my (our) Depository a nust sign this authorization)	
 Signature	Date	Signature	Date	
FOR BANK USE ONLY:			DEPOSITORY INSTITUTION	