HORIZON BANK

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):	Primary SSN:	
Address:		
Home or Mobile Phone #:	Business Phone:	
Horizon Bank Loan Number to be Credited:		
Payment Amount:	Frequency:	
Beginning Date:	Ending Date:	

ACCOUNT DEBIT INFORMATION

I (we) hereby authorize Horizon Bank, SSB to initiate debit entries to my (our) Checking Account / Savings Account (*check one*) indicated below at the depository financial institution named below, hereinafter called DEPOSITORY, and to debit the same to such account. I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of U.S. law.

Depository Institution Na	me:			
City:		State:	Zip:	
Bank Phone #:	Name(s)	on Account:		
Bank Routing Number:		Bank Account Number:		
This authorization is to remain in full force and in effect until Horizon Bank receives written notification from me (or either of us) for its termination in such a manner as to afford Horizon Bank, SSB and my (our) Depository a reasonable opportunity to act on it. (If this is a joint account, both signers must sign this authorization) Borrower:				
Signature	Date	Signature	Date	
PLEASE ATTA	CH A COPY OF A VOI	DED CHECK FROM THE DEF	POSITORY INSTITUTION	
FOR BANK USE ONLY:				

Input Date:	_ Ву:
Date Verified:	_Ву: