



AUTHORIZATION AGREEMENT FOR AUTOMATED PAYMENTS (ACH)

Company Name _____

Customer Number _____

I (we) hereby authorize Orange Line Oil, hereinafter called COMPANY, to initiate **debit** entries to my (our) ()Checking ()Savings Account (*select one*) indicated below, at the depository financial institution named below, hereinafter called DEPOSITORY and to **debit** the same 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 Name _____

Branch _____

City _____ State _____ Zip _____

Routing Number _____ Account Number _____

This authorization is to remain in full force and effect until COMPANY has received written notification from me (or either of us) of its termination in such time and in such manner as to afford COMPANY and FINANCIAL INSTITUTION a reasonable opportunity to act on it.

Name: (first & last) _____
(Please Print)

Signed X _____

Date _____

(CHOOSE AND INITIAL the option you want)

A. One Time Payment of \$ _____, _____ (Initials)

B. Standing Authorization for statement balance to be charged on the 10th of each month _____ (Initials)

C. 1% -- 10 (10 days after delivery) _____ (Initials)

NOTE: ALL WRITTEN DEBIT AUTHORIZATIONS MUST PROVIDE THAT THE RECEIVER MAY REVOKE THE AUTHORIZATION ONLY BY NOTIFYING THE ORIGINATOR IN THE MANNER SPECIFIED IN THE AUTHORIZATION.

ATTACH a voided check from the account where the debit is to be placed.

