



P.O. Box 162449
Altamonte Springs, FL 32716
(P)877-859-8401
(F) 321-263-0286

ACH Authorization Form

Name: \_\_\_\_\_ Bank of customer: \_\_\_\_\_
(Name as spelled on the account)

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_
\*\*Address/Zip code must match the billing address associated with the account being used.

Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_
\*\*By including your e-mail address you authorize Sterling Credit to send you a copy of the receipt via E-mail.

Payment for: \_\_\_\_\_ Customer Account Number: \_\_\_\_\_

ACH Checking or Saving account Information:

Must choose one account: Checking: \_\_\_\_\_ Savings: \_\_\_\_\_

Account number (last four): \_\_\_\_\_ Routing number: \_\_\_\_\_

Name of Bank: \_\_\_\_\_

Payment Schedule:

[ ] One Time Payment in the amount of \$ \_\_\_\_\_ on date: \_\_\_\_\_

[ ] Recurring: [ ] Weekly [ ] Biweekly [ ] Monthly on this/these Day(s): \_\_\_\_\_

Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_

Recurring Payment Amount: \$ \_\_\_\_\_

Payment Authorization:

I authorize Sterling Credit Corp. (SCC) to use my Checking or Savings account, identified above, for the amount and schedule I have selected above. This authorization shall remain in effect until either the one-time payment date has expired or the recurring "end date" has expired. I may revoke this authorization by calling 877-859-8401 or by faxing a signed notice to 321-263-0286 stating my intent to cancel this authorization at least 24 hours ahead of the scheduled payment date above. All other changes such as payment amount, checking or savings account information, personal information, or payment schedule will require a new ACH authorization form to be filled out and will also need to be received at least 24 hours ahead of scheduled payment listed above. I represent and warrant that I am authorized to execute this payment authorization and certify that I am the account holder listed above. I indemnify and hold Sterling Credit Corp. harmless from damage, loss or claim resulting from all authorized actions hereunder. Heartland is our payment processor and may charge a fee on returned ACH payments. This is not a Sterling Credit Corp. Fee.

Authorized Signature: \_\_\_\_\_

Date: \_\_\_ / \_\_\_ / \_\_\_