

ACH VENDOR PAYMENT AUTHORIZATION FORM

Company Name: _____

Vendor Information:

Vendor Legal Name: _____

Doing Business As (DBA) Name (if applicable): _____

Vendor Address: _____

Vendor Phone: _____ Vendor Email: _____

Bank Information for ACH Payment:

Bank Name: _____

Bank Address: _____

Routing Number (ABA): _____ Account Number: _____

Account Type (Checking/Savings): _____

Payment Authorization:

By completing and signing this form, Vendor authorizes Company to initiate ACH credit entries to the bank account indicated above for payment of invoices and other amounts due. Vendor agrees that the origination of ACH transactions to Vendor's account must comply with the provisions of U.S. law. Vendor certifies that the information provided is accurate and that Vendor is authorized to authorize ACH payments to this account. Vendor agrees to notify Company immediately of any changes to the banking information provided herein to avoid payment delays or errors.

Vendor's Legal Name Signature: _____

Printed Name of Signatory: _____

Title/Position: _____

Authorized Signature: _____

Date: _____

Company Use Only:

Company Contact Name: _____

Company Contact Phone: _____

Company Contact Email: _____

Date Processed: _____ Processed By: _____

Terms and Conditions:

1. Vendor warrants that it is the rightful owner or authorized agent of the bank account provided and has full authority to authorize ACH payments to/from this account.
2. Vendor agrees to indemnify and hold harmless Company from any loss or damages arising out of incorrect or fraudulent bank information provided by Vendor.

3. Company reserves the right to revoke or modify ACH payment authorizations at any time with notice to Vendor.
4. Vendor understands that ACH payments are subject to the rules and regulations of the National Automated Clearing House Association (NACHA) and applicable U.S. federal and state laws.
5. This authorization is to remain in full force and effect until Company has received written notification from Vendor of its termination in such time and manner as to afford Company and the bank a reasonable opportunity to act on it.
6. Vendor agrees that any disputes or claims arising under this form shall be governed by the laws of the United States of America.

VENDOR SIGNATURE

COMPANY AUTHORIZED SIGNATURE

Signature: _____

Signature: _____

Date: _____

Date: _____

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