# Authorization Agreement for ACH Origination To TNFCU

TRUE NORTH
FEDERAL CREDIT UNION

- ☐ New authorization
- ☐ Change authorization
- ☐ Termination of authorization

Member Name: _____ Member Account Number: _____

I hereby authorize True North Federal Credit Union (TNFCU) to initiate ACH entries for my account(s) as indicated below with the depository financial institution (DEPOSITORY) named. Fill out the information below:

## From(Debit): Other Financial Institution Name:

ABA: _____ (9 digits) Account Number: _____

Type: ☐ Savings ☐ Checking ☐ Flat Amount: _____ **OR** ☐ Monthly payment (1st mortgage ONLY*)

*Payment may adjust with annual escrow analysis.

## To (Credit): TNFCU

Account Number:

_____

S _____ L _____
*(Share)* *(Loan)*

Start Date*: _____ End Date: _____ *(if known)* ***Must give 5 days notice.**

**Frequency:**

- ☐ Annually
- ☐ Biweekly
- ☐ Semi-Annually
- ☐ Monthly on the _____
- ☐ Monthly at the end of the month
- ☐ Quarterly
- ☐ Semi-Monthly Last (15th & end of Month)
- ☐ Semi-Monthly (14th & 28th of Month)
- ☐ One Time Only on _____
- ☐ Weekly

All entries transmitted by the member and the credit union are bound by the NACHA Operating Rules. Member has authorization to debit or credit the account at the receiving financial institution. Member rights and responsibilities under the law are outlined in the Consumer Financial Protection Bureau Regulation E which is included in the Credit Unions Account Handbook. Member agrees not to violate the laws of the U.S. by generating transactions to any account blocked by the Office of Foreign Asset Control (OFAC). Credit Union will make every effort to process, transmit and settle for transactions, but is not liable for any inconsequential, special, punitive or indirect loss or damage if the transaction is delayed. **Member understands that if the account number and name on the transaction are inconsistent, the receiving financial institution may credit/debit the account solely on the account number.** The Credit Union will not be held responsible for losses incurred due to an inaccurate routing or account number having been supplied in the ACH Authorization Agreement. Member agrees to maintain an account at the credit union with available funds to cover any credit entries transmitted on the member's behalf or fund any returns received for prior debit entries transmitted by Credit Union during the term of the agreement. Credit Union may debit any account maintained by member to satisfy amounts owed. Both parties may terminate this agreement with ten days written notice and such termination does not affect the member's obligations under this agreement. Unless an end date is provided within the original ACH Authorization Agreement, the authorization will remain active until the Credit union has received this written notice. Fees will be charged for any returned item in accordance with the Credit unions schedule of fees.

_____ _____
Member Signature Date

**FOR TNFCU USE ONLY**

Received by: _____ Date received: _____ ☐ In Person ☐ Telephone ☐ Mail