

ACH/EFT ORIGINATION AGREEMENT Incoming Entries

☐ New ☐ Change Amount ☐ Change Frequer	ncy \square Change Institution \square	Change Date	
I, (we) (h (hereinafter, Beach Municipal FCU) to originate Ele	ereinafter, me or company) autho ctronic Fund Transfers (EFT) from	orize Beach Municipal Federal Credit Union	
Institution Name		citution Address	
beginning on in the amount of \$ authorization replaces all previous authorizations t	and continuing each requal hat I may have made.	juested frequency until revoked by me in writing	
select the Frequency of the Transaction:		DISCLOSURES AND IMPORTANT INFORMATION	
□ Weekly □ One-time Only □ Monthly □ Bi-Weekly □ Semi-Monthly (and of each month) □ Monthly-Last day of the month Choose account type: □ Savings □ Checking		Your rights and responsibilities under the law are outlined in the Federal Reserve Board's Regulation E that governs a variety of electric transactions. In general, you are protected from loss providing you are responsible in reading your account statements and reporting any problems and errors promptly. You were provided with a Regulation E disclosure when you opened your account with us. If we do not complete a transaction to or from your	
Routing Number: (9 digits)		accounts on time or in the correct amount according to our agreement with you, we will be liable for your losses or damages. However, there are some exceptions. We will NOT be liable for the following:	
Account/MICR Number: To: Beach Municipal FCU Choose account type: Loan Draft ID Last four of Credit Card Account # List savings account number and last if Member Number: Member Name: By signing below, I certify all information the best of my kno	four "K" record	Through no fault of ours, you do not have enough money in your account to make the transactions. The money in your account is subject to an uncollected funds hold, legal process or any other encumbrance or agreement restricting a transaction. If you do not have sufficient funds available through overdraft protection. If circumstances beyond our control (such as fire or flood) prevent the payment transfer, despite reasonable precautions that we have taken. 15 Days advanced notice required to process initial setup, changes and revocation. In the event that non-payment of this debit is received back to Beach Municipal FCU, the Credit Union reserves the right to impose a \$30 insufficient funds fee to the above listed Beach Municipal FCU member number. Should the status of this loan be past due, a \$5 processing fee will be added to the loan payment amount being transferred from the debiting institution.	
AGREEMENT:			
Authorized Signer:	Date:	If the debiting account is a business account, Beach Municipal FCU requires documentation identifying authorized	
Employee Signature:	Date:	signers.	
PLEASE ATTACH A COPY OF VOIDED CHECK TO THIS FORM. THE ORIGINAL FORM MUST BE SUBMITTED TO ACH DEPARTMENT WITH VOIDED CHECK OR DEPOSIT TICKET. Back Office Use Only		When selected date is a holiday, items will be processed next business day. In the event that Beach Municipal FCU deposits/withdraws funds erroneously into my account, I authorize Beach Municipal FCU to reverse the transaction on my account for an amount not to exceed the original amount of the erroneous credit. After TWO consecutive returned entries, the ACH Origination agreement will be terminated.	
Added By Teller: Date:			

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