

## Direct Deposit Authorization

**AUTHORIZATION AGREEMENT FOR ALLEGRO ESCROW SERVICES, A DIVISION OF  
EVERGREEN NOTE SERVICING, TO INITIATE AUTOMATIC CLEARING HOUSE (ACH) CREDITS**

*Signatures from all account Payees are required.*

*When returning this agreement, please include a copy of a voided check to ensure accuracy.*

I authorize Allegro Escrow Services, a Division of Evergreen Note Servicing (“ALLEGRO”) to initiate Automatic Clearing House (ACH) credits to my designated bank account at the financial institution identified below. This authorization pertains to my Contract Collection/Escrow Account and the schedule of payments described in the contract. I understand that there is a transit time of two (2) business days for the transfer of funds from ALLEGRO to the financial institution (if the date falls on a weekend or holiday, funds will be credited the following business day). This authorization is to remain in force until the schedule of payments is completed or until ALLEGRO has received written notification from me of a change or termination allowing no fewer than five (5) days for ALLEGRO to act. ALLEGRO may discontinue this service at its discretion after providing written notification thirty (30) days in advance or immediately upon credit return from my bank. ALLEGRO shall not be required to provide advanced notice when advanced notice is impossible. I authorize ALLEGRO to recover funds in the event of an error or in the event that the Account Payer’s funds are returned for any reason, including non-sufficient funds. I authorize ALLEGRO to release to the financial institution information that may be required to recover any erroneous funds transfers.

Evergreen Account Number: \_\_\_\_\_

Payee/Lender/Seller Name: \_\_\_\_\_

**Month Direct Deposit to start:** \_\_\_\_\_ (no less than 15 days from date of request)

Bank Account Holder Name: \_\_\_\_\_

Bank Name \_\_\_\_\_ Bank Telephone # \_\_\_\_\_

Bank Address \_\_\_\_\_

Bank Routing # \_\_\_\_\_ Bank Account # \_\_\_\_\_

Account Type:  Personal Checking  Personal Savings  Business Checking  Business Savings

By signing below, I certify that I am the owner of the above referenced bank account with the authority to authorize the requested Automatic Clearing House (ACH) credits.

Payee/Lender/Seller Signature \_\_\_\_\_ Date \_\_\_\_\_

Payee/Lender/Seller Signature \_\_\_\_\_ Date \_\_\_\_\_

Payee/Lender/Seller Phone \_\_\_\_\_ Email \_\_\_\_\_

Changes to existing direct deposit will not be processed without a completed Automatic Deposit Authorization form AND a verbal verification with an Allegro agent.

Allegro may delay the disbursement of funds in the amount of \$5,000.00 or greater, or any amount in accordance with its Payments Policy, for up to ten (10) days.