

Automatic Withdrawal Authorization

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

Signatures from all account Payors 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) debits from my designated bank account at the financial institution identified below. I authorize ALLEGRO to debit my designated bank account according to the schedule of debits provided to ALLEGRO by me or on my behalf or as otherwise provided by agreement. I understand that debits will be withdrawn on the due date unless otherwise indicated and that sufficient funds must be available in my designated account two (2) business days prior to the actual date of the debit (if the due date falls on a weekend or holiday, funds will be withdrawn and credited on the following business day). ALLEGRO may adjust the amount being debited from designated bank account to reflect changes/other provision of my contract, though balloon payments will not be withdrawn from the account. This authorization is to remain in force until the schedule of debits is completed or until ALLEGRO has received written notification from me of a change or termination allowing no fewer than five (5) business 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 receiving notification of a returned/rejected payment from my bank. ALLEGRO shall not be required to provide advanced notice when advanced notice is impossible. ALLEGRO is not liable to any person for not completing a transaction as a result of any limit on my designated bank account, or if a financial institution fails to honor any debit from such account. I understand that it is my responsibility to notify ALLEGRO immediately if a scheduled debit does not occur. I authorize ALLEGRO to recover funds in the event of an error or in the event that a prior debit is returned for any reason, including non-sufficient funds.

Evergreen Account Number:	
Payor/Borrower/Buyer Name:	
Debit Monthly Beginning://	_(no less than 15 days from date of request)
Bank Account Holder Name	
Bank Name	Bank Telephone #
Bank Address	
Bank Routing #	
Account Type: Personal Checking Personal Savin	gs Business Checking Business Savings
Optional: Additional principal to be regularly debited \$	
By signing below, I certify that I am the owner of the above requested Automatic Clearing House (ACH) debits.	e referenced bank account with the authority to authorize the
Payor/Borrower/Buyer Signature	Date
Payor/Borrower/Buyer Signature	Date
Payor/Borrower/Buyer Phone	Email

Requests for recurring ACH debits require proof of bank account ownership in the form of a voided bank check or copy of recent bank statement prior to setup. 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.

Allegro may decline to establish recurring ACH debits for customers with a repeat history of payments returned/rejected for non-sufficient funds (NSF).