



AUTOMATIC LOAN PAYMENT AUTHORIZATION

Date: _____
Member Name: _____
Member Phone: _____

New Setup **Change to Existing**

I hereby authorize Bethpage Federal Credit Union to make the following recurring electronic withdrawal. If the due date of any scheduled payment is not on a business day, activity will occur on the next business day. The authorization must be received at least 5 business days before the first withdrawal.

Withdraw From Account Information:

Financial Institution Name: _____
Routing Number: _____
Account Number: _____ Checking Savings

Apply To Account Information:

Account Owner Name(s): _____
Loan Account Number: _____
Amount*: \$ _____

**For a consumer line of credit, the payment will be 2.5% of the outstanding principal balance, a minimum of \$10.00 or remaining balance if less than \$10.00. *For a Home Equity Line of Credit 100% interest calculates on your daily balance from the previous month and if you have chosen the option to pay monthly principal it is .25% of your principal balance as of the last day of the previous month*

Beginning Date: ____/____/____

Frequency: Monthly

Attach voided check imprinted with account owner's name.

Cancel Existing

I hereby authorize Bethpage Federal Credit Union to cancel the following recurring electronic withdrawal. The authorization must be received at least 10 business days before the next scheduled electronic withdrawal.

Loan Account Number: _____
Withdrawal / Credit Amount: \$ _____

Please return this form, with a voided check if applicable, to:
Bethpage Federal Credit Union
Operations Center
PO BOX 6602
Greenwood Village, CO 80155-6602

Signature: _____ **Date:** _____

This authorization is to remain in effect until Bethpage Federal Credit Union receives written notification of termination. Once an account is closed or a loan is paid off, it is the responsibility of the member to cancel the automatic loan payment. Please retain a copy for your records.