



ACH Origination Loan Payment Form

Electronic Authorization - ACH Origination (Debit)

MEMBER INFORMATION			
Member Name:		MCU Member Number:	
Street Address:	City:	State:	Zip:
Home/Cell Phone:		Email Address (for Payment Confirmation):	
SET UP A NEW PAYMENT			
Please set up automatic monthly transfers to my MCU loan from the following External Account .			
Name of External Financial Institution:		Routing & Transit/ABA #:	
External Account Number: <input type="checkbox"/> Checking <input type="checkbox"/> Savings		Payment to Loan #:	
Transaction Amount:		Start ACH origination on this date:	
Frequency (How Often):			
<input type="checkbox"/> One-Time Request <input type="checkbox"/> Weekly (W) <input type="checkbox"/> Biweekly (B) <input type="checkbox"/> Monthly (M) <input type="checkbox"/> Quarterly (Q)			
AUTHORIZATION			
I (we) make this authorization subject to the following conditions:			
<ol style="list-style-type: none"> 1. I am the owner of the accounts listed above. 2. This authorization must be received a minimum of 15 days prior to the first deduction date to allow sufficient time to process a prenotification to the external financial institution. 3. I acknowledge that the origination of ACH entries to my account must comply with the provisions of U.S law and that MCU does not originate International ACH Transactions (IAT). 4. Deductions will be made based on the information provided by me above. It is my responsibility to provide Meijer Credit Union (MCU) with the correct Routing and Transit number and account number of the external financial institution. 5. I have the right to terminate this authorized debit at any time by notifying MCU in writing at least 15 days prior to the payment date. Additionally, I understand that MCU will terminate this authorized debit within 15 days of loan payoff unless initiated sooner by me. 6. MCU, after two consecutive cycles of failing to receive the payment electronically, may opt to terminate this authorization. 7. One attempt per specified frequency to obtain funds electronically will be made. I am responsible to make other payment arrangements should the account have insufficient funds. 8. When the transaction date falls on a weekend or holiday, the transaction will be done the next business day. 9. I (we) agree to indemnify and hold harmless MCU from all costs (to the extent permitted by law) if any transfer is dishonored, whether with or without cause and whether intentionally or inadvertently. 10. For Mortgage Payments Only: I understand that if my MCU loan is a mortgage loan with an escrow for property taxes and/or insurance, I authorize MCU to increase/decrease my total automatic loan payment as my minimum monthly payment changes due to the annual escrow analysis. 			
Member Signature:			Date:
CANCEL AN EXISTING PAYMENT			
Monthly Transfer Amount:		Date to Cancel ACH:	
Member Signature:			Date:

OPERATIONS DEPT. USE ONLY

ORIGINATION:

Processed by: _____

Date Processed: _____

Verified by: _____

EFT CANCELLATION:

Processed by: _____

Date Processed: _____

Verified by: _____