

**AUTHORIZATION AGREEMENT FOR DIRECT PAYMENTS
(ACH DEBITS)-BUYERS**

Name: _____
(Business name, customer name)

ID Number _____
(Tax ID/Social Security)

I/We hereby authorize TitleOne, hereinafter called COMPANY, to initiate debit entries to my/our **Checking**/ **Savings account** (select one) indicated below at the depository financial institution named below, hereinafter called DEPOSITORY, and to debit the same to such account. I/we acknowledge that the origination of ACH transactions to my/our account must comply with provisions of U.S. law.

Depository
Name _____

Branch _____

City _____

State _____ Zip _____

Routing
Number _____

Account
Number _____

Amount of payment
to be withdrawn \$ _____

Day of Month
To Be Withdrawn _____

Date Authorized to Begin Withdraw of Payment ____ / ____ / ____

This authorization is to remain in full force and effect until COMPANY has received written notification from me (or either of us) of its termination in such time and in such manner as to afford COMPANY and DEPOSITORY has reasonable opportunity to act on it.

Name (s) _____
(Please Print)

Escrow Number _____

Date _____

Signature _____

NOTE: ALL WRITTEN DEBIT AUTHORIZATIONS MUST PROVIDE THAT THE RECIEVER MAY REVOKE THE AUTHORIZATION ONLY BY NOTIFYING THE ORGINATOR IN THE MANNER SPECIFIED IN THE AUTHORIZATION