

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

Name \_\_\_\_\_  
(Business name, customer name)

ID Number \_\_\_\_\_  
(Tax ID/Social Security)

I/We hereby authorize TitleOne, hereinafter called COMPANY, to initiate credit entries to my/our  **Checking**/  **Savings account** (select one) indicated below at the depository financial institution named below, hereinafter called DEPOSITORY, and to credit 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 \_\_\_\_\_

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 \_\_\_\_\_  
(Print Name)

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**