

Auto Draft (ACH) Authorization



Please select one of the following:

A new Auto Draft request

A change to current Auto Draft

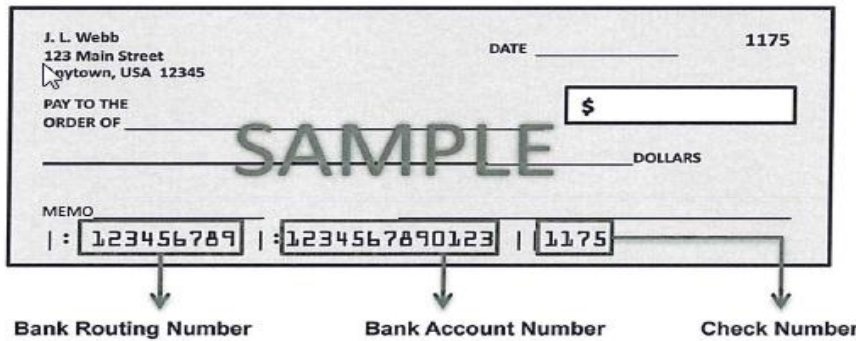
Customer Information

Customer Name:	Loan Account #:
Address:	City/State/ZIP:
Daytime Phone Number:	E-mail Address:

Bank Account Information

Name of Financial Institution:	
Routing Number:	
Account Number:	

Type of Account: Checking Savings



Payment Options

Deduct my required loan payment ONLY.

Deduct my required loan payment PLUS an additional \$ _____ principal payment with each draft date.

Draft Date

Monthly Draft (enter the day of the month for your bank account to be automatically drafted) _____.

Important: Please Read Before Signing

First Reliance Bank is authorized to debit my/our bank account until First Reliance Bank has received written notification to terminate this service from me/us. Termination requests must be received by First Reliance Bank ten (10) days prior to the next scheduled monthly or semi-monthly draft.

I/we understand that is my/our responsibility to have funds available in my/our account on each payment date until the monthly/semi-monthly payment is deducted. As long as I/we meet this responsibility, my/our loan payment will be considered current and I/we will not incur any late charges. I/we understand that a NSF fee will be assessed for any payment returned to First Reliance Bank as a result of insufficient funds.

(Signature of Account Owner) Date _____ Date _____

(Signature of Account Owner)

Forward Completed Authorization Form To:
 E-mail: customercare@firstreliance.com
 Fax to: (843) 674-3256
 Or Mail to: First Reliance Bank (Attn: Loan Operations)
 PO Box 6109, Florence, SC 29502-6109

If you have any questions, please contact our Customer Care Center at 888-543-5510.
 Thank you for your business!

