



Loan Payment ACH Authorization Form

- Complete and send form to: Axos Bank
PO BOX 401420
Las Vegas, NV 89140-1420
- Alternatively, fax the form to: 1-858-764-9985
- Please contact Loan Servicing with any questions at: 1-866-923-7112 Monday – Friday 8:00 a.m. to 5:00 p.m. (PT)

Loan Number:	Borrower Name:
Auto Pay Effective Date:	Bank Name:
ABA/Routing Number:	Account Number:

I hereby authorize Axos Bank to debit my above referenced account for monthly payments, including applicable principle, interest, taxes, insurance and fee amounts, as required by my loan agreement on the due date listed above and on every payment due date thereafter as defined in the loan agreement documents. If the payment due date falls on a weekend or Federal holiday, my account will be debited on the last business day prior to the weekend or holiday. I understand that I will not receive notification for every scheduled debit from my account. The amount due monthly and related debits will be indicated on my account statement.

Provisional Payment:

Credit given by us to you with respect to an automated clearing house (“ACH”) credit entry is provisional until we receive final settlement for such entry through a Federal Reserve Bank. If we do not receive such final settlement, you are hereby notified and agree that we are entitled to a refund of the amount credited to you in connection with such entry, and the party making to you via such entry (i.e. the originator of the entry) shall not be deemed to have paid you in the amount of such entry.

Notice of Receipt of Entry:

Under the operating rules of the National Automated Clearing House Association, which are applicable to ACH transactions involving your account, we are not required to give next day notice to you of receipt of an ACH item and we will not do so. However, we will continue to notify you of the receipt of payments in the periodic statement we provide to you.

Choice of Law:

We may accept on your behalf payments to your account which have been transmitted through one or more Automated Clearing Houses (“ACH”) and which are not subject to the Electronic Fund Transfer Act and your rights and obligations with respect to such payments shall be construed in accordance with and governed by the laws of the state of California, unless it has otherwise specified in a separate agreement that the law of some other state shall govern.

If there are unavailable funds in my account on the date of a scheduled payment I agree to: (1) pay all charges indicated by my Bank’s Schedule of Deposit Account Fees and Terms (NSF Fees) and; (2) make that payment by means other than this authorization. If I have not paid such payment by other means, Axos Bank, at its discretion, may debit my account for such payment whenever sufficient funds are available in my account. This authorization will remain in effect until terminated, revoked or until the above referenced loan has been paid in full. Axos Bank may terminate this authorization fifteen days after written notice is mailed to any signer. The signer(s) may terminate this authorization by sending a written notice to Axos Bank. If more than one person signs the authorization, each reference to “I” and “My” will be understood to mean “We” and “Our”.

Signature:	Date:
Signature:	Date:

Bank Use Only

Received on (date): _____ Entered on (date): ___ by (processor’s initials): _____

Verified on (date): _____ by (approver’s initials): _____