

# Authorization Agreement for Pre-Arranged Payments (debits)



## 1 Client Account Information

Current Date \_\_\_\_\_

Client Name \_\_\_\_\_

EIN Number \_\_\_\_\_

Client hereby authorizes and requests National Benefit Services, LLC (NBS) to effect payment for any amounts owing by Client to NBS as such amounts become due by initiating debit entries to Client's account identified as follows:

Bank Name \_\_\_\_\_

Bank Street Address, City, State, Zip Code \_\_\_\_\_

Checking  Savings  
Account Type

Depositor Transit Routing Number \_\_\_\_\_

Depositor Account Number \_\_\_\_\_

**Who should receive a notification email when an ACH is initiated?** (*More than four email addresses can be included, upon request*)

Name 1 \_\_\_\_\_

Email Address 1 \_\_\_\_\_

Name 2 \_\_\_\_\_

Email Address 2 \_\_\_\_\_

Name 3 \_\_\_\_\_

Email Address 3 \_\_\_\_\_

Name 4 \_\_\_\_\_

Email Address 4 \_\_\_\_\_

## 2 NBS Account Information

National Benefit Services, LLC  
Name \_\_\_\_\_

1870435134  
Account ID \_\_\_\_\_

ZIONS FIRST NATIONAL BANK  
Bank Name \_\_\_\_\_

20-3886993  
Federal ID Number \_\_\_\_\_

124000054  
Transit Routing Number \_\_\_\_\_

003145497  
Account Number Information \_\_\_\_\_

It is understood that this agreement may be terminated by Client at any time by written notification to NBS. Any such notification to NBS shall be effective only with respect to entries initiated by NBS after receipt of such notification and a reasonable opportunity to act on it.

## 3 Client/NBS Signatures

It is also understood the Client shall have the rights as set forth hereof with respect to all entries initiated by NBS pursuant to this agreement.

Dated this \_\_\_\_\_ Day of \_\_\_\_\_, \_\_\_\_\_.

NATIONAL BENEFIT SERVICES, LLC

CLIENT NAME: \_\_\_\_\_

By: \_\_\_\_\_

By: \_\_\_\_\_

Its: \_\_\_\_\_

Its: \_\_\_\_\_

It is understood that all debit entries initiated by NBS pursuant to this agreement shall be subject to the following provisions:

1. If any change is made by NBS in the date of the billing cycle on or after which such entries are to be debited to such account, NBS shall send to client written notification of the new date on or after which such entries are to be debited to such account.
2. Client may notify Bank to stop payment of any entry initiated or to be initiated by NBS to Client's account pursuant to this agreement but such notice must be received by Bank in such time and in a manner as to afford Bank a reasonable time to act on it. An oral notice shall be binding on Bank only for fourteen (14) calendar days unless confirmed in writing within that period.
3. If an entry is erroneously initiated by NBS to Client's account, Client shall have the right to have the correcting adjustments made if within fifteen (15) calendar days following the date on which the bank sent or made available to Client a statement of account or notification pertaining to such entry. Client shall send or deliver to NBS a written notice identifying such entry, stating that such entry was in error and requesting NBS to make correcting adjustments to the entry.