



7389 Florida Boulevard, Suite 200A | Baton Rouge, LA 70806 | 225.214.5000 | 888.883.5757 Toll Free

## ACH AUTHORIZATION FORM

**Loan #:**

**Borrower:**

**CoBorrower:**

### General Information

Name (as it appears on your account): \_\_\_\_\_

Remittance Email: \_\_\_\_\_

### Financial Institution

Name of Financial Institution: \_\_\_\_\_

Type of Account (Checking or Savings): \_\_\_\_\_

Account #: \_\_\_\_\_ Routing#: \_\_\_\_\_

#### Authorization for ACH Debit

I authorize GMFS LLC and the bank listed to electronically debit my account to collect the Long Term Lock Fee and, if necessary, electronically credit my account to correct erroneous debits. I understand that my banking information will not be saved by GMFS once transaction is completed. I understand that I may cancel this authorization at any time by contacting GMFS LLC.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Please email to [longtermratelocks@gmfslending.com](mailto:longtermratelocks@gmfslending.com) or Fax 888-243-5509**

