



865 W 450 N, Suite 1, Kaysville, UT 84037  
Phone: 877-678-3343

### ACH AUTHORIZATION AGREEMENT

Email Completed Form to  
sales@optconnect.com

CUSTOMER INFORMATION				SHIPPING INFORMATION		
Company Name				<input type="checkbox"/> Shipping address same as billing address <input type="checkbox"/> Address is a residence		
Company Contact				Shipping Method		PO Number
Telephone	E-mail Address			Ship-To Name		Ship-To Telephone
Billing Street Address				Address		
City	State	Zip		City	State	Zip
OptConnect Partner Name		Connected Equipment		How did you hear about us?		

ADDITIONAL CONTACTS		
Contact Name #2	E-mail Address	Telephone
Contact Name #3	E-mail Address	Telephone

ACH AUTHORIZATION				
<p>The method of payment for the equipment rental and monthly Wireless Service Charges, and all other amounts or fees that become due and owing by Customer under this Agreement, is ACH. Customer authorizes OptConnect to initiate ACH transfer entries and to debit and/or credit the account identified below (the "Account") for the equipment rental and monthly Wireless Service Charges, and all other amounts or fees that become due and owing by Customer under this Agreement. Customer agrees to keep the Account funded to the extent needed to reasonably support transaction amounts posted by OptConnect under this Agreement. In the event an ACH payment is returned unpaid to OptConnect, Customer agrees to immediately pay OptConnect a returned ACH fee of \$35.00 per returned item. All shortages and adjustments are the full responsibility of Customer. The undersigned represents and warrants to OptConnect that the person executing this ACH Authorization is an authorized signatory on the Account and that all information regarding the Account and Customer is true and correct.</p>				
Financial Institution Name		Financial Institution Address		
Contact Name	Telephone	City	State	Zip
Account Type				
<input type="checkbox"/> Business Checking		<input type="checkbox"/> Savings		<input type="checkbox"/> Personal Checking
<input type="checkbox"/> General Ledger				

Routing Number	Account Number (include all leading 0's)																																	
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Authorized Signature on Account <b>X</b>	Printed Name	Email Address	Date
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**This ACH Authorization *must* be accompanied by a printed Voided Check or a letter from your financial institution stating the Customer's name, Routing Number, and Account Number.**

Attach Voided Check Here