

## ACH Authorization Agreement

I (we) hereby authorize the Regional Planning Commission of Greater Birmingham to initiate entries to my (our) checking/savings account at the financial institution listed below, and, if necessary, initiate adjustments for any transactions credited/debited in error. This authorization will remain in effect until the Regional Planning Commission of Greater Birmingham is notified by me (us) in writing to cancel it in such time as to afford the Regional Planning Commission of Greater Birmingham and The Financial Institution a reasonable opportunity to act on it. I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with the provision of United States Law.

In addition to this authorization form, please provide a voided check/deposit slip or account verification letter from the financial institution listed below. Please submit all documentation by email to ap@rpcgb.org.

Account Information:			
	Financial Institution:		
	Address:		
	City:	State:	Zip Code:
	Account Name:		
	Routing Number:		
	Account Number:		
	Type of Account: Checking	Savings	
Authorization:			
	Business Name:		
	Print Name:		
	Position at Company:		
	Signature:	Date:	
	Email:		
	Phone:		