



3 Easy Steps

1. Fill in and check all applicable pieces of information contained in this form.
2. Attach a voided check to this form to confirm your account and routing number.
3. Mail or fax this completed form to:

Pioneer Bank

Loan Processing
 Attn: ACH Payments
 PO Box 10
 Stanley, VA 22851
 FAX: 1-540-778-2807
 PHONE: 1-540-778-2294

Information

Name Date

Loan Number

Mailing Address

City State Zip

Home Phone Number Cell Phone Number

Work Phone Number

Email Address

Automatic Installment Loan Payment

Select One:

Add New Transfer Change Transfer Account Delete Transfer
(may take 3 business days) (may take 3 business days) (may take 3 business days)

Transfer From:

Checking Savings

Please attach a voided check or savings withdrawal slip. *Cannot process request without one.

Routing Number:

Account Number:

Loan Number:

Loan Payment Amount \$

Must be original loan payment amount

Date Loan Payment Due:

Authorization

You may cancel or change this agreement by giving "us" (Pioneer Bank) written notice. Your cancellation or change will be effective **3 business days** from the date "we" (Pioneer Bank) receive it.

The account(s) listed on this document are governed by their individual Terms and Conditions, unless modified by this Authorization.

You agree in consideration of this service rendered by us, to indemnify and hold us harmless from any liability or loss occurring due to the dishonor of any check or draft presented which results from any charge made or refused to be made by us under this Authorization. You agree to abide by our rules and regulations governing your account(s) as stated on your account agreement and as amended from time to time. We may take any security measures that we believe are necessary without notice to you.

If your credited account(s) listed on this Authorization is a debt you owe Pioneer Bank, then you agree that we may continue to charge the debited account(s) until the loan is paid, or until you provide us with written notice of cancellation.

You agree to keep enough money in your debited account(s) to cover the transfer(s) you requested by completing this Authorization. We may use our rights and remedies under applicable law and our rules and regulations governing these types of accounts. If your debited account does not have a sufficient balance on a day that a payment is to be debited, we may stop further efforts to debit your account(s) and ask you for the payment and all subsequent payments until all payments under the loan are current. The Bank may also impose a return item fee for each attempt to debit for the loan payment(s). At our option and discretion, we may resume charging the debited account(s) without further instruction from you once all payments are current. If we do not resume charging your debited account, we will notify you in writing that we have cancelled this Authorization. Cancellation of this Authorization does not excuse you from making timely payments under the Terms of the loan.

We will give you reasonable notice when we amend this Authorization. If this Authorization needs to be amended because of a change in State or Federal law, the change shall be effective immediately without notice. If no termination date is specified on this Authorization, it will remain in effect until terminated by you. We may terminate this Authorization by giving you written notice at the address stated on the form. Any notice will be effective immediately when mailed or delivered by Pioneer Bank.

Notice to any account holder is notice to all account holders.

By signing below, you agree to all Terms and Conditions stated on this Authorization.

Customer Signature

Date

Bank Use Only

Authorization Accepted By: _____
Pioneer Bank Representative

Date

Authorization Processed By: _____
Pioneer Bank Loan Department

Date