



APPLY TODAY FOR A TIME SAVING SERVICE FROM BCI FINANCIAL

**IF YOU MAKE YOUR MONTHLY LOAN PAYMENTS
AUTOMATICALLY FROM YOUR CHECKING ACCOUNT, YOU:**

- ✓ GET YOUR PAYMENTS IN ON-TIME
- ✓ SAVE POSTAGE
- ✓ AVOID LATE CHARGES
- ✓ AVOID HARM TO YOUR CREDIT
- ✓ HAVE PEACE OF MIND!

To sign up for this free service, just complete the form below and mail it to us now or with your next payment.

Instructions

1. Do one of the following (note that to ensure the security and privacy of your personal information you will need to print the form and mail it to us with a voided check):
 - Fill out all of the blanks now, then PRINT the form by clicking File, Print.
 - Print a blank form by clicking File, Print and fill in the blanks by hand.
2. **Attach a voided check** and mail the completed and signed form to us at:

BCI Financial Corporation
P.O. Box 566
Southington, CT 06489

AUTOMATIC PAYMENT AUTHORIZATION (ACH) FORM

Borrower 1 Name _____ BCI Retail Installment Account # _____ Today's Date _____

Borrower 2 Name _____ Primary Phone Number _____ Payment Amt. \$ _____

Address _____ City _____ State _____ Zip _____

Checking Account Bank Name _____ City _____ State _____ Zip _____

Bank (ABA) Number _____ Checking Account Number _____

The Checking Account Number and Bank (ABA) Number appears at the bottom of your actual check*

By signing below, I (We) authorize BCI Financial Corporation to debit My (Our) checking account for future payments to the BCI retail installment loan account listed above. I (We) understand that I (We) may cancel this request with (10) days written notice. I (We) further understand that I (We) are responsible for any fees (overdraft, NSF etc.) that may occur as a result of this transaction and that this service will continue until the BCI retail installment loan account is either paid off or until either I (We) or BCI cancel it.

I (We) acknowledge that the origination of ACH's to my/our account must comply with U.S. law.

Signed Borrower 1: _____ Signed Borrower 2: _____

Please allow 20 days for the first payment to be taken from your checking account. The payment will occur monthly on the payment due date or the first business day after the payment due date.

***Please include a voided check and include this authorization with your next payment and/or mail directly to:**

BCI Financial Corporation, P.O. Box 566, Southington, CT 06489

If you have any questions regarding this document, please contact BCI Financial at 203-439-9400 ext. 440