DIA SERVICING
DEDICATION INTEGRITY ASSURANCE

AUTHORIZATION FOR DIRECT PAYMENT VIA ACH (ACH DEBIT)

BORROWER/CONSUMER AUTHORIZATION FOR DIRECT PAYMENT VIA ACH (ACH DEBIT): DIRECT PAYMENT VIA ACH IS THE TRANSFER OF FUNDS FROM A CONSUMER ACCOUNT FOR THE PURPOSE OF MAKING A PAYMENT.

BORROWER NAME: _____
PROPERTY ADDRESS: _____

BANK ACCOUNT NAME _____
(EXACTLY AS IT APPEARS ON STATEMENTS):

BANK NAME: _____

BANK ADDRESS: _____

ROUTING NUMBER: _____

ACCOUNT NUMBER:_____

ACCOUNT TYPE: __ CHECKING OR __ SAVINGS

AMOUNT OF DEBIT AUTHORIZED: $ _____
START DATE: _____ **AND ON THE** _____**(ST/ND/RD)RECURRING DAY DAY OF EACH MONTH FORWARD.**

TERMS OF AGREEMENT: I/WE AUTHORIZE DIA SERVICING, LLC, TO ELECTRONICALLY DEBIT MY/OUR ACCOUNT (AND IF NECESSARY, CREDIT MY/OUR ACCOUNT TO CORRECT ERRONEOUS DEBITS) FROM THE DESIGNATED BANK ACCOUNT OWNED BY ME/US AT THE FINANCIAL INSTITUTION IDENTIFIED, AND ON THE DAYS AND AMOUNT IDENTIFIED. IN THE EVENT A FEE OR LATE CHARGE IS OWED, I/WE AUTHORIZE DIA SERVICING TO DEBIT MY/OUR ACCOUNT FOR THE AMOUNT THEN DUE. I/WE UNDERSTAND THAT THIS AUTHORIZATION WILL REMAIN IN FULL FORCE AND EFFECT UNTIL I/WE NOTIFY DIA SERVICING, LLC, IN WRITING, THAT I/WE WISH TO REVOKE THIS AUTHORIZATION. I UNDERSTAND THAT COMPANY REQUIRES AT LEAST 5 BUSINESS DAYS-NOTICE FOR A REVOCATION TO BECOME EFFECTIVE. I/WE AGREE THAT THE ACH TRANSACTIONS THAT I/WE AUTHORIZE COMPLY WITH APPLICABLE FEDERAL AND STATE LAW.

CONSUMER/BORROWER (BANK ACCOUNT HOLDER) NAME: _____

CONSUMER/BORROWER (BANK ACCOUNT HOLDER) SIGNATURE: _____

DATE: _____

IF ACCOUNT HOLDER'S NAME DOES NOT APPEAR ON CORRESPONDING LOAN ACCOUNT/LOAN DOCUMENTS
A COPY OF A VOIDED CHECK OR OTHER SUPPLEMENTAL DOCUMENTATION MAY BE REQUESTED.

IF TWO CONSECUTIVE PAYMENTS ARE RETURNED TO SERVICER DUE TO "INSUFFICIENT FUNDS", SERVICER, AT ITS DISCRETION, MAY REFUSE CONTINUED RECURRING ACH MONTHLY PROCESSING FOR A PERIOD OF MONTHS IT DEEMS APPROPRIATE.