



P.O. Box 9002, West Jordan, UT 84084 | (801) 260-7600

ACH Origination Authorization Form

New Change

Member Information

Cyprus Acct#: _____ Account Type: _____ Name: _____

Name of Bank or CU: _____ Acct Name: _____

Start Date: _____ (xx-xx-xx) Frequency: Monthly Amount: _____

Routing #: _____ Account #: _____ Checking Saving

Disclaimer

- * **Transfer Requests** will be processed on the day requested, unless the scheduled date falls on a weekend or federal holiday. The transfer will then be made on the business day preceding the weekend or holiday.
- * **To create or cancel** this authorization you must submit a written request no less than (2) business days prior to the scheduled transfer. The transfer may not be able to be started or stopped if notice is provided in less than two (2) days.
- * **If the automatic transfer is returned** for any reason, including non-sufficient funds, Cyprus Credit Union may assess a fee, as specified in Cyprus Credit Union's Schedule of Fees & Charges. Cyprus may attempt to make the transfer (2) two additional times before deeming the transfer as an unpaid return. If the payment returns a third time as unpaid, the automatic transfer will be cancelled.
- * **Cyprus Credit Union** has the right to terminate the authorization agreement for any reason. (ie: Invalid account number, non-sufficient funds (NSF), Account Closed) This Authorization shall remain in full force and effect until Cyprus Credit Union has received written notification from me (or Joint member) of its termination in such manner as to afford Cyprus Credit Union a reasonable opportunity to act on it.
- * **I agree** that the authorization transfer to my account must comply with all applicable federal and state laws or regulations including OFAC regulations.

I have read this form in its entirety and attest by signing below, that the information provided by me is true and correct, and that I will not hold Cyprus Credit Union liable for any related loss or penalty I incur, if the required information I provide is inaccurate or incomplete.

_____ (xx-xx-xxxx)

Member Signature _____ Date _____

Office Use Only

Date: _____ (xx-xx-xx) Entered By: _____ Time: _____ Branch #: _____