

SALT LAKE CITY CORPORATION
Management Services
451 SOUTH STATE STREET, #248
SALT LAKE CITY, UT 84111

EFT
ELECTRONIC FUNDS PAYMENT
AUTHORIZATION AGREEMENT

Name _____ Federal ID _____ Contact name _____

STREET/P.O.BOX _____ CITY _____ STATE _____ ZIP _____
Contact Phone number _____

e-mail # 1 for payment notification _____ e-mail #2 for payment notification _____ e-mail #3 for payment notification _____

BANK NAME _____ Routing Number _____ Account Number _____ CHECKING OR SAVINGS

BY SIGNING, I AUTHORIZE SALT LAKE CITY CORPORATION TO BEGIN MAKING PAYMENTS TO THE CHECKING OR SAVINGS ACCOUNT INDICATED ABOVE. PAYMENTS WILL BE MADE WHEN ALL SUPPORTING DOCUMENTATION IS COMPLETE AND AUTHORIZED BY AN APPROPRIATE CITY OFFICIAL. I AUTHORIZE THE FINANCIAL INSTITUTION NAMED TO CREDIT MY ACCOUNT FOR PAYMENTS RECEIVED FROM SALT LAKE CITY CORPORATION. I UNDERSTAND THIS AUTHORIZATION IS SUBJECT TO THE TERMS AND CONDITIONS OF THE EFT AGREEMENT AS SHOWN BELOW.

AUTHORIZED SIGNATURE(S) _____ DATE _____

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ATTACH COPY OF VOIDED CHECK

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PLEASE RETURN THIS FORM AND A VOIDED CHECK (IF POSSIBLE) TO:

SALT LAKE CITY CORPORATION
ATTENTION: RICHARD RUTLEDGE
MANAGEMENT SERVICES
451 SOUTH STATE STREET, ROOM 248
SALT LAKE CITY, UT 84111

OR FAX TO 801-535-7682

TERMS AND CONDITIONS

1. Payments are made on a basis determined by Salt Lake City for all properly approved invoices. Currently, payments are made weekly.
2. It is required that a new Authorization Agreement be completed 30 days prior to a bank or account number change.
3. Either party may terminate this Authorization Agreement at any time for any reason by notifying the other party in writing. Termination will be effective within 5 business days after receipt of notification.
4. A rejection of funds transfer because of a closed account or for any other reason will be treated by Salt Lake City as a termination of this agreement.