

ACH Payment Authorization Form

In this Authorization, “you” and “your” mean the Account Holder(s) who sign this Authorization. “We,” “us,” and “our” means Climb Investco, LLC or any assignee or servicer of Climb.

By signing below, you authorize us to initiate regularly scheduled electronic fund transfers in the form of ACH debit entries from your deposit account identified below (“Deposit Account”), and to credit those amounts to the amounts due under your student loan account. If necessary, you also authorize us to initiate transactions to correct any erroneous payment transaction.

By signing below you also certify that you are an authorized signor on the Deposit Account. If a different person owns the Account, you understand he or she must agree to this Authorization by signing below.

Your payments will recur every month on the dates and in the amounts specified on the payment schedule in the Final Disclosure you will receive. If you would like to be debited on a particular day of the month, please contact us by calling 1-888- 510-0533. You authorize us to seek 50% to 110% of the payment amount set forth on your payment schedule unless you advise us that you are exercising your right to receive written notice of any varying payments by writing to us at 459 Broadway, 4 th Floor, New York, NY 10013. You understand that your bank may charge a fee for any unsuccessful payment and that we have no liability for any such fee.

Deposit Account Information:

Type of Account:

Checking Account

Savings Account

Bank Routing Number:

Account Number:

Depositor Name:

You authorize us to initiate the ACH payment(s) described in this authorization form according to the terms outlined above. If any payment date described above falls on a weekend or holiday, you understand that the payment may be debited on the next business day. If you have authorized recurring payments, you understand that this authorization will remain in effect until your student loan account is paid in full or you cancel this authorization in writing (at 459 Broadway, 4 th Floor, New York, NY 10013) or by calling 1-888- 510-0533. You agree to notify us in writing of any changes in your account information, including cancellation of this authorization, at least 3 days prior to the next payment date.

SIGNATURE _____

DATE _____

SIGNATURE OF ACCOUNT HOLDER, IF DIFFERENT FROM
BORROWER _____

DATE _____

All forms can be completed and emailed back to hello@climbcrcdit.com.