

PROPERTY RESERVE, INC

PRI Use Only:

Vendor ID: _____

Authorization for ACH Deposit of Vendor Payment

Payee/Vendor Name: _____

Address: _____

City, State, Zip: _____

Tax ID Number: _____

Contact Name: _____

Contact Telephone: _____

Contact Email: _____

(Remittance information will be sent to this email address.)

Complete this section for New Enrollments or for Financial Institution/Account Changes	
Select One:	<input type="checkbox"/> New Enrollment <input type="checkbox"/> Financial Institution/Account Change
Account Type (Check One):	<input type="checkbox"/> Checking <input type="checkbox"/> Savings
Bank Name: _____	
Bank Transit/Routing (ABA) Number: _____	
Depositor Account Number: _____	
Depositor Account Name: _____	
<i>I, the undersigned (the "Vendor"), declare that the information above is true and correct, and hereby authorize Property Reserve, Inc ("PRI") to initiate credit entries ("EFT Payment") to the account number listed above, subject to the following terms: 1. Any changes to this form must be submitted to PRI in writing at least 7 days prior to the next transfer payment. 2. Vendor shall indemnify, release, and hold PRI harmless for any errors or omissions made in EFT Payments that are a result of inaccurate or incomplete information provided by the vendor on this form. 3. EFT Payments will be considered made when Vendor's financial institution has received or has control of the EFT Payment. 4. In the event of a dispute between the Vendor and PRI regarding EFT Payment, PRI's total liability shall not exceed the amount of the EFT Payment in question. 5. Either party may terminate this agreement upon 14 days written notice. 6. EFT payments made pursuant to this agreement will be governed by the Corporation Trade Rules of the National Automated Clearing House Association and Article 4A of the Uniform Commercial Code as adopted in Utah. 7. In the event of a conflict between this form and the previously negotiated agreement between PRI and Vendor, the previously negotiated agreement shall prevail.</i>	
Signature:	Date:
Name (Printed)	Title: