

STANDARD FUNDING CORP.

Mailing Address
P. O. Box 9011
Syosset, NY 11791-9011

Overnight Address
335 Crossways Park Drive
Woodbury, NY 11797

Phone: (516) 364-0200 Fax: (800) 203-2547

ACH Draft Authorization Form Agreement For Direct Payments (ACH Debits)

1. I (we) hereby authorize Standard Funding Corp. hereinafter referred to as SFC, to initiate debit and credit entries to or from the account specified below in accordance with this Authorization and the applicable rules of the National Automated Clearing House Association and its related member associations.

2. This authorization remains in full force and effect until SFC has received written notification from me (either signer) of its termination in such manner as to afford SFC and Depository a reasonable time to act on it.

3. This authorization contains the entire agreement of the parties with respect to the subject matter herein. This authorization may be amended only in a written agreement signed by both parties.

4. This ACH authorization form is specifically designed for the payments of installments pertaining to the insurance premium finance agreement I (we) have entered into with SFC. Any installment amounts or other charges which are stipulated within the finance agreement will apply to this authorization form. The installment amounts are subject to change in the event there is an additional premium or endorsement refund which applies to the original finance agreement.

Bank Name: _____

Branch: _____

Account Number: _____

Transit/ABA Number: _____

Type Of Account: _____

Checking

Savings

Business/Individual Name: (Please Print) _____

Name as it appears on Bank Account: _____

Authorized Signature Date

Authorized Signature Date

ATTACH COPY OF VOIDED CHECK HERE