## **Automatic Payment Authorization Information**

TruHome Solutions, LLC is pleased to provide borrowers with a solution that makes managing mortgage payments simple. This plan allows for the election of an automatic electronic debit from a checking or savings account. It's secure and more convenient than writing checks and paying for postage. Please note that **this plan is not required** and is one of many options available for making mortgage payments.

## **ACH Terms and Conditions**

You must agree to the terms and conditions below by completing and signing the Authorization Form provided with this agreement.

- I hereby authorize TruHome Solutions, LLC, its successors and/or assigns, authorized agents or any entity servicing my loan on their behalf to initiate electronic withdrawals from my designated account to make payments on my mortgage loan.
- I understand that I must be the owner of the designated account.
- I understand that this payment plan is not effective until TruHome Solutions, LLC provides written confirmation showing the effective date. I will continue to make my required payments until I receive confirmation and electronic withdrawals begin.
- I understand that any change or revocation in this authorization must be made in writing and received by TruHome Solutions, LLC at least five (5) business days prior to the date of the next scheduled withdrawal.
- I understand that this authorization and automatic program does not alter, change, or reduce my mortgage payment obligation in any way. This includes (but is not limited to) the required payment amount, payment due date, application of payments, assessment of late charges, or the determination of delinquencies.
- I understand that withdrawn funds may not be applied to my mortgage until sufficient funds have been accumulated for a full payment to be made.
- I understand that the electronic withdrawal amount will vary with changes in escrow or principal and interest requirements (if any).
- I understand that any additional principal payment amounts requested will be considered fixed
  values in excess of my required monthly payment and will continue to be included in the
  calculation of my electronic withdrawal amount in the event of a change in my required
  payment amount as described above.
- TruHome Solutions, LLC reserves the right to cancel this agreement for any reason. I understand that TruHome Solutions, LLC can invoke this right if three electronic payments are returned unpaid in any rolling 12-month period.
- I agree to be bound by the terms listed here.

| Mortgage Loan Account Number:  |                                    |
|--|------------------------------------|
|  |                                    |
| Accou  | nt Details                         |
| Institution Name:  |                                    |
| Institution Phone Number:  |                                    |
| Routing Number (Nine Digits):  |                                    |
| Account Number:  |                                    |
| Account Type:  | Checking .   Savings .   Savings . |
| Automatic P  | Payment Details                    |
| Monthly Electronic Debit Date: Required to be contractual due date or within allowable grace period.  If left blank, the electronic debit date will default to Contractual Due Date. |                                    |
| Requested Start/Change Date (MM/DD/YYYY):  |                                    |
| Contractual Payment Amount:  | \$                                 |
| Additional Principal Payment (optional):   | \$                                 |
| Please include a voided check or deposit slip.  Example 1 E.   | xample 2                           |
| PAY TO THE ORDER OF SIGNATURE  MEMO SIGNATURE  DOLLARS ©  SIGNATURE  Routing Number (9 Digits) Account Number Check Number Rout  | PAY TO THE ORDER OF                |
| Authorization  By signing below, I agree to the Terms and Condition  |                                    |
| Name (print):  |                                    |
| Phone Number:  |                                    |
| Property Address:  |                                    |
| Signature:   | Date:                              |
| Form Submission  |                                    |

To enroll or make a change to automatic payments, please complete this form and send it to us.

| Mail                         | Fax          |
|------------------------------|--------------|
| TruHome Solutions, LLC       | 866-949-1690 |
| PO Box 7568                  |              |
| Overland Park, KS 66207-9998 |              |