

PLUMBERS, PIPEFITTERS & SERVICE TECHNICIANS
LOCAL UNION 502

ACH PreAuthorized Payments Agreements (Debits)

This is my authorization to Plumbers and Pipefitters Local Union 502
to automatically debit one of the following: _____ checking or _____ savings account
(Please choose one)
for the usual and customary fee for one month's stamp.

I understand it is my responsibility to insure funds are available at the time of the automatic withdrawal.

_____ in _____
Financial Institution City/State

_____ Account Number

_____ Bank Transit/ABA No. (Must be nine digits)

**PLEASE ATTACH COPY OF VOIDED CHECK (checking)
OR DEPOSIT TICKET (savings) TO THIS FORM**

I understand that this authorization will be in effect until I notify my financial institution and the Plumbers and Pipefitters Local Union 502 in writing that I no longer desire this service, allowing it reasonable time to act on my notification. I also understand that if corrections in the debit amount are necessary, it may involve an adjustment (credit or debit) to my account.

I have the right to stop payment of a debit entry by notifying my financial institution before the account is charged. If an erroneous debit entry is charged against my account, I have the right to have the amount of the entry credited to my account by my financial institution, if, within 15 days following the date on which I was sent a statement of account or a written notice of such entry or 45 days after posting, whichever occurs first, or I give my financial institution a written notice identifying the entry, stating that it is in error and requesting credit back to my account.

This authorization is non-negotiable and non-transferable.

_____ Customer Name

_____ Social Security Number

_____ Date

_____ Signature