

Automatic Mortgage Payment Authorization

To take advantage of this FREE service, complete this form and return it to any Salal branch, fax it to **206.299.9474**, or mail it to: **Salal Credit Union, Attn: Mortgage Servicing, PO Box 75029, Seattle, WA 98175-0029.**

Please continue making your mortgage loan payment by check until you have been notified in writing by Salal Credit Union that your authorization form has been processed.

NEW AUTHORIZATION CHANGE AUTHORIZATION CANCEL AUTHORIZATION

Member Name: _____ Phone: _____

Member Number: _____ Mortgage Loan Number: _____

Financial Institution

Checking Savings Money Market

If Salal Account, Member #: _____ Account ID (e.g. 0040): _____

If Other Financial Institution, Name: _____

Routing (ABA) Number (9 digits): _____ Account #: _____

Payment Details

MONTHLY PAYMENT TO BE MADE ON DAY OF EACH MONTH MONTH TO BEGIN:

Payments are due on the first (1st) of each month and are considered late 15 calendar days after the due date. Automatic payments should be scheduled no later than the 15th of each month to avoid late charges. **Automatic transfers must be in one monthly transaction for the full amount of the monthly payment due. Partial transactions can not be processed via Automatic Mortgage Payment Authorizations.**

ADDITIONAL PRINCIPAL PAYMENT \$

You may designate an amount to be automatically applied to principal each month in addition to your regular payment. This extra principal payment will debit separately from the monthly regular payment.

Authorization

I hereby authorize Salal Credit Union to initiate debit entries to the checking, savings, or money market account indicated above and apply those funds to the Mortgage Loan Number identified above. I also agree to maintain an account with a sufficient balance in the checking, savings, or money market account authorized to cover this loan payment. I understand that if on three (3) occasions there are not sufficient funds in the checking, savings, or money market account identified or the account is closed, Salal Credit Union has the right to terminate this Automatic Mortgage Payment Authorization (Authorization).

This Authorization is to remain in effect until revoked in writing at least three (3) business days prior to the payment date by either party. Authorization can be revoked via mail to: **Salal Credit Union, Attn: Mortgage Servicing, PO Box 75029, Seattle, WA 98175-0029.** If there are not sufficient funds in your Salal Credit Union account on the requested transfer date, your transfer will not occur.

Member Signature: _____ Date: _____

CREDIT UNION USE ONLY

Employee Name & Teller #: _____ Date Received in Branch: _____

Automatic Payment Set-Up by Mortgage Servicing:

Completed By: _____ Completion Date: _____