



AUTOMATIC LOAN PAYMENT AUTHORIZATION

Community Bank of the Chesapeake Loan Number to receive payment: _____

I hereby authorize Community Bank of the Chesapeake to deduct my loan payment automatically from:

Community Bank of the Chesapeake Account

Deposit Account Number: _____

Another Financial Institution (All information must be provided)

Name of Financial Institution: _____

Name(s) on Account: _____

Routing Number (9 digits): _____

Account Number: _____

Checking Savings

In addition to your regular scheduled payment, you may also deduct additional funds to be applied to principal. Indicate below, if you wish, to have additional funds applied to principal each scheduled payment.

Additional Principal Amount: \$ _____
Optional

Additional Information: _____

I understand that the bank will attempt to draft the funds on or about the due date of my loan and I will have collected funds on deposit on the due date. In the event that funds are not on deposit or collected funds, I authorize the bank to make additional draft attempts in its normal course of business. This agreement may be terminated by written notice by the bank or myself.

Signature: _____ Date _____

Print name: _____

Bank use only:
Received by: _____ Date _____
Processed by: _____ Date _____
Verified by: _____ Date _____