

# CARE CREDIT REPAIR SERVICES

## CONSUMER AUTHORIZATION FOR DIRECT PAYMENT VIA ACH (ACH DEBITS)

Direct Payment via ACH is the transfer of funds from a consumer account for the purpose of making a payment. I (we) authorize ("CARE Credit Repair Services") to electronically debit my (our) account (and, if necessary, electronically credit my (our) account above to correct erroneous debits ) as follows:

(SELECT ONE) of the depository financial institution named below ("DEPOSITORY").

☐ Checking Account

☐ Savings Account

I (we) agree that ACH transactions I (we) authorize comply with all applicable law.

Depository Name \_\_\_\_\_

Routing Number \_\_\_\_\_ (number bottom left of check)

Account Number \_\_\_\_\_ (number after routing number)

With all applications, there will be a \$99 setup fee. If you opt for a month to month service, the charge is \$79 a month. If you opt for the fast track program, the base price is \$399 for 6 months. If you are looking to refinance, the fee will be \$199 one-time charge. Amount of debit(s) or method of determining amount of debit(s), please check one of the following:

☐ \$79 monthly    ☐ \$199 refi    ☐ \$399 fast track

Date(s) and/or frequency of debit(s): \_\_\_\_\_.

I (we) understand that this authorization will remain in full force and effect until I (we) notify CARE Credit Repair Services to assist with increasing my FICO score. There is no cancellation fees, I (we) understand that CARE Credit Repair Services requires at least [ 30 days] notice prior to the re-billing date in order to cancel this authorization.

Name(s): \_\_\_\_\_  
(Please Print)

Signature(s): \_\_\_\_\_

Date (MM/DD/YEAR): \_\_\_\_\_