



Commercial
Recurring ACH Payment Authorization Form

Full Name/Company Name

Address

Phone Number

Email

Payment Frequency: Monthly Quarterly

Fee Schedule

NSF or uncollect funds - \$20.00 per item

I authorize Kaelberer Construction, Inc. dba TransTrash and the Financial Institution named below to initiate **Electronic Debit Entries**, and if necessary, adjustment entries for any entries in error to my checking/savings account. I agree to pay any applicable fees for this service as disclosed in the Fee Schedule. This authority will remain in effect until I notify the Originating Company in writing to cancel this authorization at least one week prior to the next settlement date. I acknowledge that the origination of ACH transactions to my account must comply with NACHA rules and the provision of US law.

Kaelberer Construction, Inc. dba TrashTrash, will make every effort to complete this transfer unless circumstances beyond our control prevent the transfer, despite reasonable precautions that we have taken. All terms and conditions of your account agreement apply to this agreement.

Financial Institution Name

Routing Number*

Account Number

Type of Account:

Checking
 Consumer

Savings
 Business

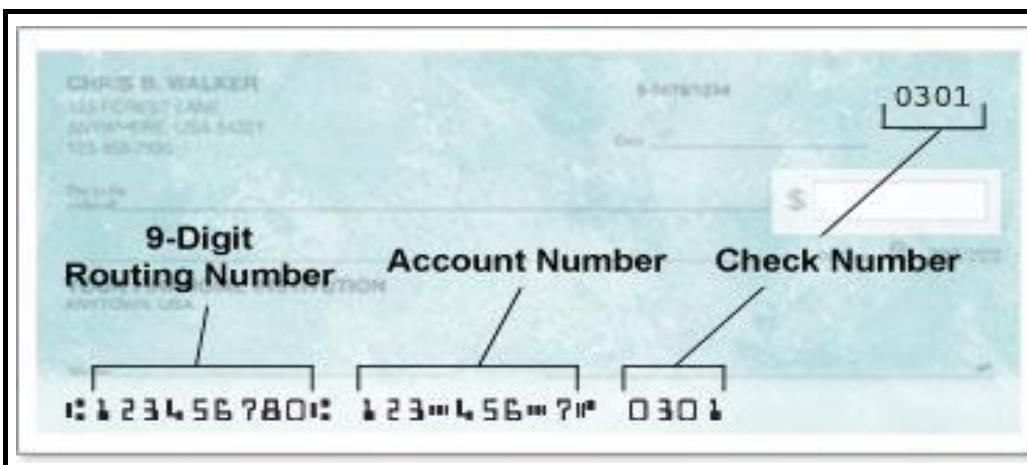
Signer Printed Name

Signature

DATE

A Completed Copy of this form must be given to the signer and the original must be kept by the Originator.

*Please contact your Financial Institution to verify their correct Routing Number for Electronic Entries. All Financial Institutions do not use the same Routing Number as stated on their check blanks and deposit slips for Electronic Entries. A cancelled check can be used in addition to but does not replace this agreement.



Must attach/scan a voided check (not deposit slip) or provide a verification from your bank of the routing and account number.