



CUSTOMERS

AUTHORIZATION AGREEMENT FOR AUTOMATIC PAYMENTS

Customer Name: _____

Current Address: _____

Contact Information: _____

Home

Mobile

Email

Mortgage Account Number: _____

Name of Financial Institution (Bank): _____

Bank Branch Address: _____

Chequing

Bank Account Number: _____ **Account Type:**

Savings

Debit Amount: _____ **on the** _____ **day/(s) of every month commencing on the**

_____, _____ **for the period January to November and on the** ___ **day of December.**

Day Month Year.

I/ (We) hereby authorize Trinidad and Tobago Mortgage Finance Company Limited, to debit my account at the financial institution named above for the amounts and frequency as detailed. I understand that this authorization will remain in effect until my loan is repaid.

I understand that a \$3.00 charge applies to this service and I hereby authorize Trinidad and Tobago Mortgage Finance Company Limited to deduct this charge along with the required instalment as stated above.

Customer Signature

Customer ID /Type (PP/NID/DP)

Witness

Date