



AUTOMATIC PAYMENT REQUEST FORM

PLEASE USE BLUE OR BLACK INK AND PRINT IN ALL CAPITAL LETTERS. DO NOT ENTER INFORMATION OUTSIDE OF THE BOXES ON THE FORM.

BORROWER INFORMATION

Last Name
First Name Middle Initial
Phone UHEAA Account Number
 Mobile
E-mail Address *A monthly electronic billing statement will be sent to this address for as long as you are enrolled in automatic payments.

PAYMENT INFORMATION

Bank or Financial Institution Name
Account Type (select one); ABA/Routing Number
 Checking Savings
Checking/Savings Account Number
Your regular monthly payment will be withdrawn UNLESS you enter an amount to be withdrawn in addition to your regular monthly payment. DO NOT include the monthly payment amount here. \$.

BANK ACCOUNT HOLDER INFORMATION (if different from borrower)

Last Name
First Name Middle Initial
Address
City State ZIP Code

BORROWER ACKNOWLEDGEMENT & AUTHORIZATION

I hereby authorize UHEAA, or its designated servicing agent, to initiate debit entries to my checking or savings account (hereinafter referred to as 'account') at my bank or financial institution. I acknowledge this authorization will remain in effect until (1) I cancel it by written or verbal notice to UHEAA or its designated servicing agent, which must be made more than 3 days prior to the next scheduled payment due date or (2) I am sent written notification of termination by UHEAA or its servicing agent. I understand lack of adequate funds in my account to cover the payment may result in cancellation of this automatic payment service. I acknowledge cancellation of automatic payments will result in the loss of the reduced interest rate borrower benefit. I understand and agree if the amount of my regular monthly payment amount changes due to capitalized interest, or other reasons, the amount of the automatic debit will also change, and I will be mailed a summary disclosing my new payment amount. I agree to have monthly billing statements sent to me electronically while on automatic payments. I authorize UHEAA and its agents and contractors to contact me regarding my request on my loan(s), including repayment of my loan(s), at the number that I provide on this form or any future number that I provide for my cellular telephone or other wireless device using automated telephone dialing equipment or artificial or prerecorded voice or text messages.

BANK ACCOUNT HOLDER'S SIGNATURE DATE (MMDDYYYY)
BORROWER'S SIGNATURE DATE (MMDDYYYY)