



NATIONWIDE AUTOMOTIVE SERVICES

800 W Yamato Road
Boca Raton, FL 33431

P: 561.338.3151 | F: 561.338.3120
www.nas.agency

ACH Authorization

Legal Entity Name (“Payee”): _____

Payee’s DBA/Assumed Name (if applicable): _____

Dealership Name (if applicable): _____

Contact Details:

Please note: to provide you with excellent customer service and help protect your information, a member of our team may reach out to your designated contact to verify the information on this form.

Contact Name: _____

Phone Number: _____

Email(s): _____

Email(s) for remittance advice (if different from above): _____

Payment/Billing Instructions:

Name on Bank Account: _____

Banking Institution: _____

ACH Routing Number: _____

Account Number: _____

Account Type: Checking Savings

ACH Date (if applicable): 10th 15th (if no date is selected, ACH Date will default to the 10th)

The undersigned, as an authorized representative of Payee, hereby authorizes Nationwide Automotive Services (“NAS”) to initiate credit and/or debit entries to the account at the banking institution referenced above (“Banking Institution”). In the event of a deposit made to the account by NAS in error, Payee further authorizes NAS to electronically debit the account to correct any such erroneous deposit.

Payee acknowledges that while NAS does not charge a fee to process ACH transactions, any related costs or fees charged to Payee by its Banking Institution shall be the sole responsibility of Payee.

Payee understands that this authorization shall remain in full force and effect until Payee provides fourteen (14) days’ written notice to NAS via email to AP@nas.agency, indicating that Payee wishes to revoke this authorization.

Payee:

Signature: _____

Effective Date: _____

Printed Name: _____

Title: _____