



Automatic Payment Request

Please accept this letter as notification that I have established a new checking and/or savings account at Solvay Bank. I would like the following payment to be automatically debited from the Solvay Bank account listed below.

- Establish Automatic Payment
- Change my existing Automatic Payment

Automatic Payment Information:

Company Name: _____

Company Account No.: _____

Payment Amount: \$ _____

Personal Information:

Name: _____

Mailing Address/City/State/Zip: _____

Home Phone: _____ Cell: _____

Bank Account Information:

Account No.: _____ Checking Savings Money Market

Solvay Bank Routing Number: 021309735

I authorize:

- The company listed to initiate withdrawal of my funds from the above Solvay Bank account
- Solvay Bank to debit funds from my account
- This authorization to remain in effect until I send written notice of change or cancellation

Signature: _____ Date: _____