



P.O. BOX 6048
 DEARBORN, MICHIGAN 48121
 PH 888.336.2700
 dfcufinancial.com

ACH Origination Maintenance

Member Number / Organization Number:

Business Information

Member/Organization Name		DBA/Assumed Name		EIN/TIN	
Business Address		City		State	
				Zip	

ACH Origination Change Information

Increase of Aggregate Limits - Please complete the Request Aggregate Limits and ACH Transactions Types sections

NOTE:

- An increase requires approval and a signed ACH Amendment. The approval process could take up to five (5) business days.
- If the requested aggregate limit is below \$50,000, provide three (3) months of bank statements.
- If the requested aggregate limit is \$50,000 or over, provide three (3) months of bank statements plus one (1) year of business financial statements.

Decrease of Aggregate Limits - Please complete the Request Aggregate Limits and ACH Transactions Types sections

NOTE: A decrease requires a signed ACH Amendment.

Terminate ACH Services - the company requests to Terminate/Cancel the ACH services for the Member Number listed above.

NOTE: Termination of the ACH Origination Agreement for the ACH Member Number listed above shall not affect any of DFCU Financial's rights and Company's obligations with respect to Entries initiated by Company prior to such termination, or the payment obligations of Company with respect to services performed by DFCU Financial prior to termination, or any other obligations that survive termination of the ACH Origination Agreement.

Change Billing Account: Former Billing Account: _____
 New Billing Account: _____

Replace Lost/Stolen Token - Fee to replace a token is \$20.00

ACH Approver Name: _____
 Token ID Number, if known: _____

Add a New ACH Approver - Please complete the DFCU OnLine ACH Approver section with all current ACH Approvers. Each approver will receive a token. There is a \$20.00 fee for each token.

Name of Person to be Added: _____

Remove an ACH Approver - Please complete the DFCU OnLine ACH Approver section with all current ACH Approvers.

Name of Person to be Removed: _____

DFCU OnLine ACH Approvers - List only users who have ACH approval rights in DFCU OnLine

- If you are adding a new ACH Approver, you must add his/her name in the table below **along with all other active** ACH Approvers
- If you are removing an ACH Approver, do not include his/her name in the table below. **List only active** ACH Approvers

DFCU OnLine ACH Approver Name 1	DFCU OnLine ACH Approver Name 4
DFCU OnLine ACH Approver Name 2	DFCU OnLine ACH Approver Name 5
DFCU OnLine ACH Approver Name 3	DFCU OnLine ACH Approver Name 6

Requested Aggregate Limits

Aggregate ACH Collections and ACH Single Receipt limit per day (credit): \$ _____
Aggregate EFTPS (Tax), Payroll, ACH Payments, and ACH Single Payment limit per day (debit): \$ _____
Aggregate ACH Collections and ACH Single Receipt limit per month (credit): \$ _____
Aggregate EFTPS (Tax), Payroll, ACH Payments, and ACH Single Payment limit per month (debit): \$ _____

ACH Activity (fill in all that apply)

Transaction Type	#/Acct/Day	#/Day	#/Month	Amt/Trans	Amt/Acct/Day	Amt/Day	Amt/Month	Frequency	SEC Code
ACH Payroll									
ACH Single Pmts									
EFTPS (Tax Pmts)									
ACH Payments									
ACH Collections									
ACH Single Receipts									
ACH Pass Thru*									

*ACH Pass Thru allows all SEC Codes except IAT. IAT cannot be processed through DFCU Financial.

Agreement & Authorization

This form supersedes, takes precedence and replaces any such change that preceded it.

On behalf of the Company, the undersigned hereby requests to modify the ACH services for the ACH Member Number listed above. The undersigned agrees this request may require approval and/or an ACH Amendment form to be completed.

DFCU OnLine Administrator Signature

DFCU OnLine Administrator Printed Name

Title

Date

Date _____ Branch _____

Employee _____

Verified By _____