

**AUTHORIZATION AGREEMENT FOR PRE-
AUTHORIZED PAYMENTS**

(Please print clearly)

Business Name: _____

Business Tax ID: _____

I (we) hereby authorize **NorDutch Technologies, LLC.**, hereinafter called BUSINESS, to initiate debit entries to my (our) Checking account indicated below the depository name below, hereinafter called DEPOSITORY, to debit the same to such account.

Depository Name: _____ Branch _____

City: _____ State _____ Zip _____

Transit/ABA No. _____ Account No. _____

This authority is to remain in full force and effect until BUSINESS and DEPOSITORY has received written notification from me (or either of us) of its termination in such time and in such manner as to afford BUSINESS and DEPOSITORY a reasonable opportunity to act on it.

Name(s) _____ ID Number _____
(Please Print)

Date _____

Signed X _____

Date _____

Signed X _____

CREDIT CARD AUTHORIZATION

(Please print clearly)

Business Name: _____

Credit Card Type (Circle One) MC Visa AMEX Discover

Account Number: _____ VCode: _____

Expiration Date: _____

Name on Card: _____

I hereby authorize **NorDutch Technologies, LLC.**, to charge my above listed credit card for my monthly fee.

Name(s) _____

(Please Print)

Date _____

Signature _____