



UNITED FUEL

ACH AUTHORIZATION FORM

Store#: _____ FEIN: _____ Legal Name: _____
Address: _____
Mobile: _____ Work: _____ Email: _____

Bank Name: _____ Branch: _____ Contact: _____
Address: _____
Routing No: _____
Account No: _____
Effective as of: _____

*****Please attach a voided check to this form*****

I/We ("Customer"), hereby authorize United Fuel, LLC ("UF"), its assigns, or successors, to initiate debit entries and to initiate credit entries, if necessary, to account listed above and the financial institution named above, hereinafter called "Bank", to credit and/or debit the same to such account.

This authorization will remain in effect until terminated by Customer upon 30 days advance written notice to UF, its assigns and successors.

Name: _____

Signature: _____

Date: _____

Contact Name: _____

Email Address: _____