## **Hauler Vendor Form**



Company Information
Name:
Address:
City, State, Zip:
Phone:
Mobile Phone:
ax:
mail:
Vould you like to be signed up for plant updates and receiving hours? (Please select one)  Text ☐ Email ☐ Both ☐
Vould you like to receive remittance details electronically? (Please select one) 'es $\square$ No $\square$ If yes, please list email address:
Please Select One:
Individual Legal Name Social Security Number:
Corporation not subject to receipt of Form 1099 Misc.  Federal ID Number:
☐ Partnership
Federal ID Number:
Payment Method (Select One Only):  Payment by ACH or Wire Transfer **(Please attach a copy of a voided check for verification)
Bank Name:
Routing Number:
Account Number:
Name on account:
Check (If Mailing Address is different than contact information please complete)
Name:
Address:
City, State, Zip Code:
y signing and completing the enclosed form, you authorize Shell Rock Soy Processing LLC (SRSP), its subsidaries and affliliates to nake future payments relating to grain settlement via ACH Transfer if selected above. SRSP if necessary, can iniate debit entries adjustments for any credit entries in error. This authority will remain in effect until termination upon 30 days written notice by eit fendor or SRSP.
Authorized Signature: Date:
itle: