

# ACH Form

## MERCHANT ACH DEBIT FORM

Merchant DBA: \_\_\_\_\_ Merchant ID: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

Partner ID: \_\_\_\_\_ ACH Reason: \_\_\_\_\_

Financial Institution: \_\_\_\_\_

Name (as it appears on account): \_\_\_\_\_

Routing Number: \_\_\_\_\_ Account Number: \_\_\_\_\_

Account Type (please choose two): ☐ Checking ☐ Savings ☐ Business ☐ Personal

☐ **One-Time**

One-Time Amount: \_\_\_\_\_ Date Of ACH: \_\_\_\_\_

☐ **Monthly License Fee**

Recurring Monthly Fee: \_\_\_\_\_

All monthly POS license fees will be charged by Mynt POS directly to the merchant, via the banking information listed on this form.

I understand any POS equipment will not be ordered until the upfront payment has cleared; or the full amount has been paid per our agreement.

This authorization is to remain in full force and effect until completion of contract signed in conjunction with this ACH Form or until POS Pros has received written notification from me of its termination in such time, and in such manner, as to afford POS Pros and Financial Institution a reasonable opportunity to act on it.

Merchant Signature: \_\_\_\_\_ Date: \_\_\_\_\_