

Return completed form by fax or email or regular mail: Fax (210) 618-0561 or email Staff@coveyfin.com
Covey Financial, PO BOX 790892, San Antonio TX 78279

Automatic Payment Agreement

I/We hereby authorize Covey Financial, LLC, to initiate automatic withdrawals of the required monthly installment for my loan. I fully agree and authorize Covey Financial to deduct the required monthly payment which includes required principal and interest along with any amount due for escrow. Escrow includes, but is not limited to, property taxes and insurance, and any future required increase due to escrow obligations. The payment shall be automatically deducted from the account specified below. I acknowledge that there can be a \$25.00 charge for any payment returned due to insufficient funds or any other error. I understand this authorization will remain in effect until I cancel it in writing, and I agree to notify Covey Financial, LLC in writing of any changes in my account information or termination of this authorization **3 days prior** to the next payment date. I acknowledge that the origination of ACH transactions to my account shall comply with the provisions of U.S. law. I certify that I am an authorized user of this bank account and will not dispute these scheduled transactions with my bank. Covey Financial, LLC may, at its option, choose to not use this ACH and require borrower(s) to otherwise pay amounts due.

For payments from your Checking or a Savings Account, please provide:

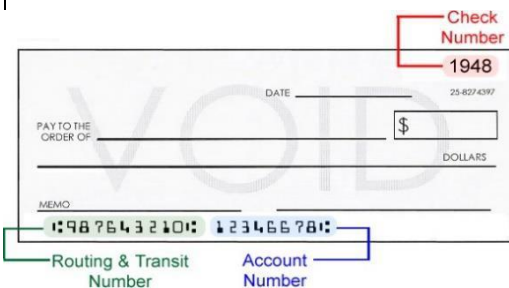
Routing Number: _____.

Account Number: _____.

Bank Name: _____.

Borrower's Email Address: _____.

Payment Withdrawal Date: _____ (choose a day of the month for the monthly payment be withdrawn, please ensure does not exceed the grace period in your loan documents)



**PLEASE ATTACH A
VOIDED CHECK TO
THIS FORM**

By signing below, I agree to the terms of this Automatic Payment Agreement.

Sign and Date

Sign and Date