

## EFT | ACH Authorization

The below-designated borrower (“Borrower”) hereby authorizes Grandbridge Real Estate Capital LLC (“GREC”) and its authorized agents, from and after the date of execution hereof, to initiate debit entries by Electronic Funds Transfer (“EFT”) through the Automated Clearing House (“ACH”) network or other available means to the Borrower’s account indicated below, in payment of the monthly principal and interest payments, escrow and reserve deposits and other sums due (individually and collectively the “Obligation”) under the terms of the note, mortgage/deed of trust and the other loan documents (“Loan Documents”) executed by Borrower in favor of GREC, or the relevant lender represented by GREC. This authorization will remain effective until modified or terminated by the express written directive or consent of GREC. Any such modification or termination must be preceded by at least 30 days’ prior written notice to GREC. The Borrower agrees that any failure to initiate or settle an EFT on the due date specified in the Borrower’s Loan Documents is neither a waiver of the right to do so, nor a waiver or modification of any terms of the Loan Documents. The EFT will commence with the monthly Obligation indicated below, or, if not otherwise indicated, the next monthly Obligation after the date this authorization is signed.

**Borrower’s Name:** \_\_\_\_\_

**Property Name and Address:** \_\_\_\_\_

**Bank Name and Address:** \_\_\_\_\_

**Bank Telephone Number:** \_\_\_\_\_

**Bank Account Name:** \_\_\_\_\_

**Bank Account Number:** \_\_\_\_\_ *(Not all account numbers will contain 16 digits.)*

**Bank Routing Number:** \_\_\_\_\_ *(Please attach voided check to ensure accurate bank routing number.)*

**Check One:**     Checking Account     Savings Account     Other ( \_\_\_\_\_ )

**EFT to commence on the due date for the Obligation due in the following month and year:** Month: \_\_\_\_\_ Year: \_\_\_\_\_

The below-signed individual certifies that he/she is the Borrower or is an authorized agent of the Borrower with the authority to execute this instrument, that the bank and account information above is accurate and complete and that the bank indicated above is a member of the ACH network. The Borrower agrees that GREC and third parties, including the above designated bank, may rely upon this instrument as being valid and in full force and effect, absent express notice otherwise.

**Borrower Signature:** \_\_\_\_\_

**By: Name:** \_\_\_\_\_

**Title:** \_\_\_\_\_

**Tel:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Please send the completed form (along with a copy of a voided check)  
to the street address, email address or fax number listed below:**

**Grandbridge Real Estate Capital LLC**

Attn: Servicing ACH Processing

200 South College Street, Suite 2100, Charlotte, NC 28202

Email: servicing@grandbridge.com | Fax: 866.665.0246 | 877.262.6063