



DEALERSHIP ACH PAYMENT AUTHORIZATION

For your convenience, Ascent Administration Services, LLC has made arrangements for you to pay for each monthly remittance processed, through the PCRS/PCMI. These amounts may be charged to your debited from your bank account or both by checking the appropriate box as indicated below. You will be charged for the amount due at the time of remittance as determined by the PCMI Service Contract System Portal. This information will be stored in the PCMI/PCRS system. This authorization may be revoked by notifying Ascent 10 business days in advance.

ACH AUTHORIZATION

I hereby authorize Ascent Administration Services, LLC to withdraw funds via ACH from my bank account in settlement of the monthly balance due with respect to service contract and aftermarket products:

Name of Financial Institution: _____

Bank Address: _____

Bank ABA/Routing Number: _____

Bank Account Number: _____

Account Name: _____

Authorized Signature: _____ Date: _____

Dealer Number: _____