

Consent for Automatic Payment Deductions

Date: [Insert Date]

[Your Name]
[Your Address]
[City, State, Zip Code]
[Email Address]
[Phone Number]

[Recipient's Name]
[Company's Name]
[Company's Address]
[City, State, Zip Code]

Dear [Recipient's Name],

I, [Your Name], hereby consent to the initiation of automatic payment deductions from my account for the purpose of [specify purpose, e.g., monthly subscription, loan repayment, etc.]. I understand that these deductions will occur on a [weekly/monthly] basis, starting from [start date].

Below are the details for the account to be charged:

Account Holder's Name: [Your Name]
Bank Name: [Your Bank Name]
Account Number: [Your Account Number]
Routing Number: [Your Routing Number]

I understand that I may revoke this authorization at any time by providing a written notice to [Company's Name].

Thank you for processing this request. Please feel free to contact me if you require any further information.

Sincerely,

[Your Signature (if sending a hard copy)]
[Your Printed Name]