

Authorization for Automatic Debit Card Payments

Lender (Name and Address): Zeus Financial
P.O. BOX 200607
Austin, TX, 78720 Phone: (512) 212-1250

Account Number with Zeus: _____

Buyer's Name

Co-Buyer's Name

Type of Debit Card (mark one): Visa ____ MC ____ AMEX ____ Discovery ____

Cardholder Name

Card Number

Expiration Date

ZIP Code

Security Code

Bank Name (if applicable)

Payment Schedule:

The payment amount that will be automatically debited is based on your current payment schedule.

Regular Car Payment Amount: \$ _____ Auto Insurance - CPI: \$ _____

Total Car Payment: \$ _____

Payment Frequency: _____

Automatic Payments to Zeus Financial's Account:

By signing below, you authorize Zeus Financial Services to make debit entries in the form of Debit Card payments to your Auto Loan in accordance with your Payment Schedule. **You understand that each transaction with the authorized Debit Card has an extra processing fee of \$3.99 that will be charged at the moment of the transaction.**

Your payment will be made automatically from your designated card. If your due date falls on a weekend or holiday, your payment will be deducted on the next business day after your payment due date.

If a charge has been initially declined, you authorize Zeus Financial to attempt to re-charge the designated card at a later date. If you want to cancel this authorization, you must do so by sending a written notice to Zeus Financial. You must send this written cancellation at least 5 days prior to the next payment due date or payoff of the contract.

For inquiries about debit card automatic transactions or questions about your account with us, please call (512) 212-1250.

X _____
Signature of Card Owner

Date

X _____
Full Name of Card Owner

