



**BAY BRIDGE
ADMINISTRATORS**

*"Your solutions begin
at the Bridge"®*

Questions? Contact Us

Phone: 512-329-5069

Email: agentservices@bbadmin.com

AGENT ACH CREDIT AUTHORIZATION AGREEMENT

The undersigned Insurance Agent or Agency (the "RECEIVER") hereby (1) authorizes Bay Bridge Administrators, LLC ("BBA", "ORIGINATOR") to make commission payments by electronic funds transfer (EFT) through the Automated Clearing House (ACH) network pursuant to the terms of this Agreement and the Rules (the "Rules") of the National Automated Clearing House Association, (2) certifies that it has selected the following depository financial institution ("DEPOSITORY"), and (3) directs that all such electronic funds transfers be made as provided below:

Depository Institution (Bank) Name: _____

Routing Transit Number: _____ Account Number: _____

Depository Account Type: Checking Savings

Please include a voided check with this agreement.

RECEIVER acknowledges that the origination of ACH transactions must comply with the provisions of U.S. law.

RECEIVER acknowledges that the terms and conditions of all agreements with BBA concerning the method and timing of payments shall be amended as provided herein. BBA will schedule the "Settlement Date" on any EFT payments to occur no later than the fifth (5th) banking day for commissions earned from the previous month.

RECEIVER shall comply with and be bound by the Rules, as amended from time to time. Any reference to the Rules shall include any amendment to the Rules in effect on the date of the ACH Entry.

This authority is to remain in full force and effect until BBA has received written notification from RECEIVER of its termination in such time and in such manner as to afford BBA a reasonable opportunity to act on it.

Authorized Signature: _____ Date: _____

(Signature must be the same as on signature card for account.)

Name/Title: _____ BBA Agent No.: _____

Agent/Agency Name: _____ Tax ID: _____

Email Address: _____

Please complete, sign, and return this agreement with a voided check or deposit slip to:

Email: agentservices@bbadmin.com

Fax: (512) 275-9358

Mail: PO Box 161690 Austin, TX 78716