



11000 N Mopac Expy, Suite 300, Austin, TX 78759

### Recurring Payment Authorization (ACH)

By completing this form, you authorize regularly scheduled charges to your bank account by SpareFoot. You will be charged each billing period for the total amount due for that period. SpareFoot will email a receipt to you, and the charge will appear on your bank statement. You agree that you will be charged the balance due as indicated on your reconciled monthly statement.

(Company Name) \_\_\_\_\_, "Company" authorizes SpareFoot to debit the bank account indicated below on or around the 11th day of each month.

Facility Name: \_\_\_\_\_

Facility Address: \_\_\_\_\_ City/State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Billing Email Address(es): \_\_\_\_\_

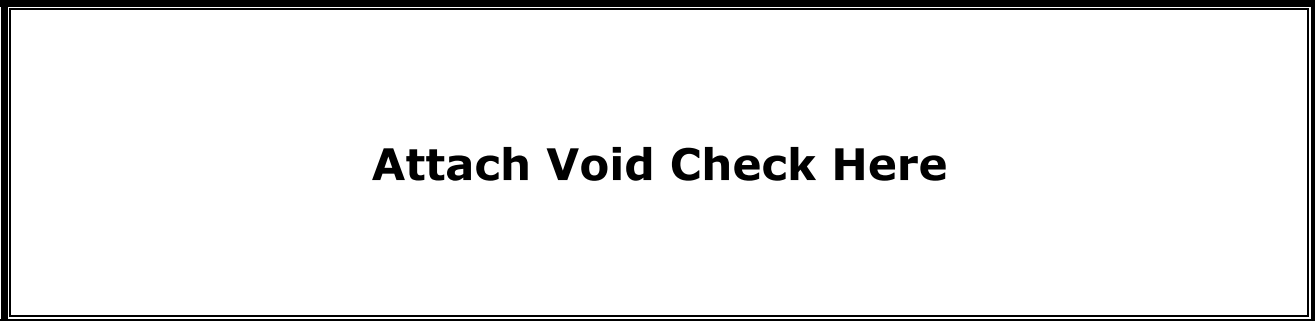
SpareFoot Account ID: \_\_\_\_\_ Bank Account Information:  Business Checking  Personal Checking

Financial Institution Name: \_\_\_\_\_ City/State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Bank Routing Number (must be 9 digits)	Bank Account Number (cannot exceed 15 digits)																													
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(Enter the above information from the bottom of your check. Do not include the check number.)

In order to sign up, you must attach a voided copy of your check. Deposit slips are not accepted. For security reasons, we recommend that the check is voided.



This authorization will remain in full force and effect until SpareFoot has received written notification from me, within 15 days of the next payment date in order to provide SpareFoot a reasonable opportunity to act on it.

X \_\_\_\_\_  
Signature of Authorized Check Signer

\_\_\_\_\_  
Date

\_\_\_\_\_  
(Print) First, Middle Initial and Last Name

\_\_\_\_\_  
(Print) Title

I certify that I am an authorized representative of Company and that I have the authority to authorize these payments on Company's behalf. Company understands that this authorization will remain in effect until it is canceled in writing, and agrees to notify SpareFoot in writing of any changes in its account information or termination of this authorization at least 15 days prior to the next billing date. If the above noted payment dates fall on a weekend or holiday, Company understands that the payments may be executed on the next business day. Company understands that because these are electronic transactions, these funds may be withdrawn from its account as soon as the above noted transaction dates, and that it will have limited time to report and dispute errors. In the case the transaction is returned for Non-Sufficient Funds (NSF) Company understands that SpareFoot may at its discretion attempt to process the charge again within 30 days, and agrees to an additional \$20 charge for each attempt returned NSF, which will be initiated as a separate transaction from the authorized payment. Company has certified that the above business bank account is enabled for ACH transactions, and will promptly reimburse SpareFoot for all penalties and fees incurred as a result of Company's bank rejecting ACH debits or credits as a result of the account not being properly configured for ACH transactions. Both parties agree to be bound by NACHA Operating Rules as they pertain to these transactions. Company must comply with all applicable laws with respect to the origination of ACH transactions to its account. Company agrees not to dispute these scheduled transactions with its bank provided the transactions correspond to the terms indicated in this authorization form.

**When completed, please email this form to [billing@sparefoot.com](mailto:billing@sparefoot.com) or fax to (512) 276 - 6716.**

*SpareFoot will retain this document on file.*