AUTHORIZATION FOR AUTOMATIC TRANSFERS

BANK OF NORTH DAKOTA
STUDENT LOAN SERVICES
SFN 18397 (02-2008)

Borrower's Name			Social Security Number	
Address		City	State	ZIP Code
Home Telephone Number	Work Telephone Number	Cell Telephone Number	E-Mail Address	
Account(s)			Monthly Payment	

I authorize the Bank of North Dakota (the "Bank") and the Financial Institution named below (the "Account Bank") to initiate transfers from my checking/savings account at the Account Bank for the purpose of making Student Loan payments to the Bank of North Dakota. The transfers will be in the amount stated above each month until my loan is paid in full or until notification of payment change from the Bank or until I notify the Bank in writing to stop payment of the transfers. The transfers will be completed on the **1st, 9th, 16th, or 23rd of each month** or the following business day if the transfer date is a non-business day.

I authorize my lender to capitalize (add to the principal balance) accrued interest on my account(s) for any interest due which is required to bring my account current for the processing of this authorization form, or during any period the lender is unable to receive funds from my account due to non-sufficient funds.

PLEASE COMPLETE THE FOLLOWING (PRINT LEGIBLY)

Account Type - **Please include a voided check, a copy of your check blank, or deposit slip for savings accounts.** (check only one) ☐ Checking ☐ Savings	Payment Due Date (check only one) ☐ 1st ☐ 9th ☐ 16th ☐ 23rd
Account Name (the name(s) on the checking/savings account)	
Account Bank (the name of the financial institution from which the funds will be drawn on)	
Bank Account Number (your account number (checking/savings) from which you are authorizing the withdrawal)	
Bank Account ABA Routing Number (this is the 9 digit number located on the bottom of your deposit ticket or check)	

Borrower's Signature (Account holder's signature required when applicable)	Date
Co-Borrower's Signature (signature required when applicable)	Date

PLEASE NOTE:

Continue to make your regular monthly payments until you receive notification indicating the effective date of the first automatic payment.

PO Box 5509
1-800-472-2166 ext. 5660
FAX: 701-328-5629

BISMARCK, ND 58506-5509
701-328-5660

mystudentloanonline.nd.gov
TDD: 1-800-643-3916
E-mail: bndsl@nd.gov