

Quantity needed	Product	Purchase Price	Monthly Service
	DPL (IP only)	\$125 (includes shipping)	\$10.00

Customer Information

A

Customer Name _____

Customer Contact _____

Email Address _____

Street Address _____

City, State, Zip _____

Phone number _____

Shipping Address (if different)

B

Street Address _____

City, State, Zip _____

Phone number _____

ACH Authorization Release

C

Bank Name _____

Branch City/State/Zip _____

Account Type Business Checking Personal Checking Savings

Routing & Transit # _____

Account # _____

Continues on page 2

Please check the boxes indicating BOTH Single and Multiple Use

D

Single Use ACH Authorization Release For Purchase Of Wireless Unit

The customer identified above, by checking this box, hereby authorizes NewYorkATM.com and its financial institution, to initiate and/or transmit one (1) automatic clearing house (ACH) debit entry to the customer's account identified herein below. The parties agree and understand that this ACH authorization is for a single debit entry only (a credit entry shall only be authorized for a single reversal related to this transaction). The customer acknowledges that the purpose of this ACH release is for the payment to NewYorkATM.com for the one-time provision of goods or services from NewYorkATM.com to the customer and that this constitutes a valid business relationship between the two parties. The Customer agrees to indemnify and hold NewYorkATM.com and/or Partner's financial institution harmless from any and all claims associated with compliance with the aforementioned single use ACH authority. The customer agrees to provide a voided check to properly validate customer's account and routing numbers. **ALL PRODUCTS PURCHASED THROUGH NEWYORKATM.COM ARE FOR ATM USE ONLY. ANY UNIT DEEMED TO BE ABOVE AVERAGE ATM USAGE WILL BE SUSPENDED IMMEDIATELY, AND MAY BE SUBJECT TO A REACTIVATION FEE.**

D

Multiple Use ACH Authorization Release For Monthly Service

The customer identified above, by checking this box, hereby authorizes DPL and its financial institution, to initiate and/or transmit multiple automatic clearing house (ACH) debit entries to the customer's account identified herein below. The parties agree and understand that this ACH authorization is for multiple debit entries (a credit entry shall only be authorized for a reversal related to this transaction). Customer acknowledges that the purpose of this ACH release is for the payment to DPL for multiple provisions of goods or services from DPL to the customer and that this constitutes a valid business relationship between the two parties. The customer agrees to indemnify and hold DPL and/or customer's financial institution harmless from any and all claims associated with compliance with the aforementioned multiple use ACH authority. The customer agrees to provide a voided check to properly validate customer's account and routing numbers. **ALL PRODUCTS PURCHASED THROUGH DPL ARE FOR ATM USE ONLY. ANY UNIT DEEMED TO BE ABOVE AVERAGE ATM USAGE WILL BE SUSPENDED IMMEDIATELY, AND MAY BE SUBJECT TO A REACTIVATION FEE.**

E

PLEASE ATTACH A COPY OF YOUR VOIDED CHECK!!!

Fax form and voided check back to jon: 518-691-8403 or email to jon@newyorkatm.com

Signature of Account Holder

Printed Name of Account Holder

Date

Thank-you for your Business!

RhodelslandATM.com

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