



Payment Method Authorization

I. Authorization (For Methods A, B or C in section II). This is my (Customer) authorization for FleetOne, L.L.C. ("Fleet One"), a subsidiary of TransPlatinum Service Corporation, to debit my bank account. **I have provided my bank information below and attached a copy of a voided check.**

_____ at the _____ branch of
(Bank Account Number) (Bank Routing/ABA#) (Branch)
_____, (_____) in _____, _____
(Name, Phone Number of Financial Institution) (City) (State)

I understand that Fleet One will process only the specified amount indicated on the ElectroniChek or the amount submitted online electronically via Automated Clearing House (ACH). In the event of an error and a refund or credit is due back to the Customer, Fleet One will make the correction within 72 hours.

II. Payment Method Selection. In order to use any of the following selections, this form must be correctly completed and submitted to Fleet One. Select one of the four (A-D) methods below as the manner in which you choose to pay your Fleet One Local invoices and if you select method A, B, or C, please complete the "Authorization" section:

A. AutoPay (ACH*) – This form of electronic payment is automatically initiated on the due date of your invoices.

Payment Confirmation: If you'd like to receive payment confirmation, please choose (✓) your preferred method of communication and list the appropriate contact information.

Please email my payment confirmation to: _____.

Please fax my payment confirmation to: _____.

B. InternetPay – Allows you to initiate electronic payment (ACH) through Fleet One's online account management. To get set up for Online Account Management, please call 800.359.7587.

C. FaxPay – Allows you to initiate electronic payment (ACH) when you fax a completed Fleet One ElectroniChek form.

D. Customer Initiated ACH – I, the Customer, will initiate the payment and understand this method takes approximately 2-3 days to reach Fleet One. When it's time to pay the bill, I just initiate an electronic ACH payment to Fleet One through my bank and direct the payment to:
SunTrust Bank Acct Number: 1000027509586 ABA: 061000104 Atlanta, GA 30308

III. Non-Sufficient Funds (NSF). If an entry is returned for non-sufficient funds, I will remit payment via wire to Fleet One's wire account for the returned entry amount plus \$30.00 (thirty dollar) return fee - or maximum amount allowable by law - and will make all future payments via wire.

IV. Change in Bank Account Information. When customer bank account information changes, Customer agrees to complete and submit to Fleet One a new Payment Authorization Form to ensure funds are withdrawn from the correct account.

V. Cancellation. I understand that this authorization will be in effect until I notify FleetOne, LLC, 5042 Linbar Drive, Nashville, TN 37211 and my financial institution in writing that I no longer desire this service, allowing them reasonable time to act on my notification. I also understand that if corrections in the debit amount are necessary, it may involve an adjustment (credit or debit) to my account. Fleet One reserves the right to discontinue accepting the payment method at any time.

(Customer Company Name)

(Fleet One Account Number)

(Customer Name – Authorized Person, Print)

(Authorized Person – Signature)

(Date)

Fax this completed form to 877.357.7587. For questions, call 800.359.7587.

*ACH – Automatic Clearing House

