

4592 Ulmerton Road Suite 200 Clearwater, Florida 33762 Tel (800)793-9661 Fax (800)790-7274 515 N. Sam Houston Pkwy E Suite 180 Houston, Texas 77060 Tel (866)707-6131 Fax (281)999-0629 2141 E. Camelback Road Suite 120 Phoenix, Arizona 85016 Tel (888)599-5766 Fax (855)660-8733

Mid-Atlantic Finance Company Automatic Payment Plan

Welcome to the Mid-Atlantic Finance (MAF) Automatic Payment Plan (The Plan) hosted by Call Pass Tech. Enrollment in the plan allows you to make your payments to MAF quickly and easily without writing checks or mailing payments. Your bank will deduct the scheduled payment plus convenience fee from your checking/savings account at your requested interval and forward the funds to CallPass Tech electronically. The auto debit will continue routinely while your loan has an outstanding balance regardless of whether your account is current, delinquent or paid ahead.

- 1. The fee for auto debit is \$2 per transaction. This is included and deducted with your scheduled payment.
- 2. There is a 3 day period to establish the relationship with your bank. Once completed, you will receive a confirmation letter stating your payment information. Please mail your completed form and all documents in a separate envelope to:

Mid-Atlantic Finance Company Attn: Accounting Department P.O. Box 12139 St. Petersburg, FL 33773

- 3. The auto debit will automatically cancel 2 payments prior to maturity. Due to the possible variation of payments at the maturity of a loan, we will cancel the auto debit 2 payments prior to the expected maturity date. Please call Mid-Atlantic Finance to get your final figures.
- 4. There will be a 30 day hold on your title. This applies if you have an auto debit posted to your account, and then pay the account off with certified funds within 30 days of the auto debit. If your auto debit cancels, and you pay the account off by certified funds more than 30 days after the final auto debit posting, you will receive the title in 7-10 business days.
- 5. Your Mid-Atlantic Finance account must be current to qualify for auto debit.
- 6. Choosing a different payment frequency does not alter your contract. Though we are allowing different payment frequencies, it does not alter or amend the terms and/or conditions of your original retail installment contract. Those terms and/or conditions remain in full force and effect. Please be advised that any late charges accrued due to the auto debit payment frequency chosen will still be considered due and payable. Make sure that you are choosing a payment frequency that will keep your account current.



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- 7. Enrollment in the Automatic Payment Plan is not mandatory.
- 8. Certain payment frequencies can increase interest charges over the course of the loan.
- 9. If you would like to cancel the Automatic Payment Plan, please submit a request in writing. Mail the request to the address provided or fax to 727-324-1453. There is a 5 business day processing period. If you have payments scheduled in that timeframe, they may process. You will be responsible for any other payments that come due.
- 10. The name on the checking/savings account must be either the maker or co-maker.
- 11. The Automatic Payment Plan cannot be used to bring an account current. If your account is behind during your auto debit period you are responsible for bringing it current. The plan can only debit your account in accordance with your requested interval and amount. If an auto debit is returned from the bank, (insufficient funds, stop payment) you are responsible for replacing that payment.
- **12. Biweekly is not the same as Semimonthly.** Biweekly is every 2 weeks; therefore there are 26 payments per year. Semimonthly is 2 times per month; therefore there are 24 payments per year. Biweekly payments will have 2 months in the year that have 3 payments due. This will carry over to the auto debit.

Please designate your requested **starting date** on the authorization form (next page)



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Signature Date	e
Telephone	
City, State, Zip	
Address	
*Must be either Buyer or Co-Buyer on the Motor	Vehicle Contract.
Name on Account*	
MAF Account Number	
CUSTOMER INFORMATION	
City, State, Zip	
Type of Institution (Please check appropriate box) □Bank □Credit Union □Savings & Loan □Other Name of Financial Institute	Telephone Number
Type of Account (Please Check Appropriate Box) □Checking- **attach a voided check** **NO STARTER OR BUSIN please provide a letter from your bank on bank letterhead with youndber. □Savings- provide a letter from your bank on bank letterhead with your bank on bank letterhead w	our name, bank account number and transit
FINANCIAL INSTITUTION INFORMATION	
understand that this does not alter my original contract and I am still re election for auto debit. I understand that my last payment may differ fro contact MAF to determine my final payment and make final payment a information pertaining to the Automatic Payment Plan, and agree to the	om the scheduled payment. Therefore, I will arrangements. I certify that I have read all the
payments withdrawn on a (frequency) basis a	t a charge of \$2.00 per transaction. I
scheduled payment starting for \$ that appears on my Motor Vehicle Contract if I am voluntarily changing	_ which may differ from the payment amount may payment frequency. I elect to have my
I hereby authorize Mid-Atlantic Finance Company/CallPass Tech to de	ebit my bank account indicated below for each

To avoid delays, please make sure that you fill in every blank. Use blue or black ink. Please make sure that you have signed the form, and all documents are attached for timely processing. If you have any questions, please call the account services department at 800-793-9661 ext 600 or 866-707-6131 ext 400. Se Habla Español.