

EMPLOYEE CHANGE REQUEST FORM

lher	eby request to have the follow	wing information updated
on my Community Loan Center loan #	effective date	·
TYPE OF CHANGE	ENTER UPDATED INFORMATI	ION
Name		
Address		
City, State, Zip		
Email Address		
Home Phone		
Mobile Phone		
Bank Information*	Routing:	
Complete ACH Authorization Forms	Account:	
	Bank Name:	
Payroll Deduction Amount*		
Complete an updated Payroll deduction form		
ACH Employee Bank Draft		
Amount		
ACH Payment Deduction Dates		
*changes on items with asterisk require add	itional forms to be filled out and sig	gned.
Changes will be completed once a Corverify account information.	nmunity Loan Center represer	ntative contacts you to
Signature	Date	
<u>Fax</u> to: (956) 574-8293 <u>Email</u>	to: molivarez@cdcb.org	ygarza@cdcb.org

frodriguez@cdcb.org jmartinez@cdcb.org



Permissible Purpose Ongoing Authorization

IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING A NEW ACCOUNT

To help the government fight the funding of terrorism and money laundering activities, Federal Law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account.

What this means for you: When you open an account, we will ask for your name, address, date of birth, and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents.

TO: Name/address of Lender

Community Loan Center 901 East Levee Street Brownsville, TX 78520

FAIR CREDIT REPORTING ACT, STATE OF TEXAS PERMISSIBLE PURPOSE FOR ONGOING AUTHORIZATION

I hereby authorize COMMUNITY LOAN CENTER, to obtain any and all information regarding my employment, checking and/or savings accounts, credit obligations and all other credit matters that it may require in connection with my application for a loan. I hereby authorize COMMUITY LOAN CENTER, to obtain additional credit reports and other information for the purposes of reviewing the account; to obtain credit reports and other information for purpose of taking collection action on the account; and to obtain credit reports and other information for other legitimate purposes associated with the account. The information obtained will be used only for a bona fide "permissible purpose" as defined by the Fair Credit Reporting Act. It is understood that a photocopy of this form will also serve as an authorization. COMMUNITY LOAN CENTER may report information about your account to credit bureaus. Late payments, missed payments, or other defaults on your account may be reflected in your credit report.

Disclaimer and Signature

I warrant the truth of the information contained in this application and that all statements made in this application are made for the purpose of obtaining the loan applied for. Lender, its agents, successors, and assigns, will rely on the information contained in this application, and I have a continuing obligation to amend and supplement the information provided in this application if any of the material facts I represented should change before closing. If I have left any spaces in this application blank, Lender, its agents, successors, and assigns, may assume the information requested is adverse. I authorize Lender, its agents, successors, assigns, and employees, to investigate and verify all information I provided to Lender, its agents, successors, and assigns. I understand that it is my sole and exclusive responsibility to determine any and all aspects of federal tax considerations related to consumer loan interest deductibility and acknowledge that Lender, its agents, successors, and assigns, have not provided any tax advice to me. Lender, its agents, successors, and assigns will keep this application whether or not my credit request is approved.

Certification: I certify that the information provided in this application is true and correct as of the date set forth opposite my signature on this application and acknowledge my understanding that any intentional or negligent misrepresentations of the information contained in this application may result in civil liability and/or criminal penalties including but not limited to, fine or imprisonment or both under the provision of Title 18, United States Code, Section 1001, et seq., and liability for monetary damages to the Lender, its agents, successors, assigns, insurers, and any other person who may suffer any loss due to reliance upon any misrepresentation I made in this application or in any other manner.

ACKNOWLEDGEMENT: The undersigned hereby acknowledges receipt of Fair Credit Reporting Act, State of Texas Permissible Purpose Ongoing Authorization, and our Privacy Notice.		
Printed Name:		
Signature:	Date:	



ELECTRONIC FUNDS TRANSFER AUTHORIZATION FORM Special Instructions

In lieu of my periodic installments made automatically out of my paycheck from my employer to the **COMMUNITY LOAN CENTER**, if I should leave my employer, am terminated, or abandon my job, I authorize you to electronically remove my payment from my bank account by Automated Clearing House ("ACH") transfer. As a duly authorized check signer on the financial institution account identified in my loan application, I authorize the **COMMUNITY LOAN CENTER** to perform a scheduled or periodic electronic funds transfer debits and/or credits from my account identified in my loan application for payments due or when applicable, apply electronic funds transfer credits to the same. This applies to check by phone payments as well as any other electronic payment. I understand the dollar amount can vary depending on the loan amount and terms of repayment with COMMUNITY LOAN CENTER.

Furthermore, if any such electronic debit(s) should be returned by my financial institution as Non-Sufficient Funds (NSF), I authorize, COMMUNITY LOAN CENTER, to collect a return item fee of \$25 per item by electronic debit from my financial institution identified below.

For accounting purposes, all electronic debits will be reflected in the monthly bank statement that corresponds with the financial institution account identified in my loan application. This "Permissible Purpose Ongoing Authorization" will remain in effect for this loan and any future loans applied for with COMMUNITY LOAN CENTER. I have a continuing obligation to notify COMMUNITY LOAN CENTER should my bank account information change while any and all of my loans remain unpaid and have an outstanding loan balance.

I understand and authorize all of the above as evidenced by my signature below.

Print Client Name:	
AUTHORIZING SIGNATURE:	DATE:
Routing number:	
Bank account number:	
Bank Name:	