



EFT AUTHORIZATION FORM

Please complete this form to authorize electronic funds transfer (EFT) payments for your Silverton Oil account.

If you have any questions, contact us at **806-823-2451**.

1 CUSTOMER INFORMATION

Account Name(s): _____
Account Number: _____
Email Address: _____

2 BANK INFORMATION

Bank Name: _____ City: _____
State: _____ Zip Code: _____
Routing Number: _____ Account Number: _____
Account Type: Please Select ▼

* Routing number must be 9 digits.

3 AUTHORIZATION

I (we) hereby authorize Silverton Oil Company to initiate debit entries to my (our) account indicated above at the depository (bank) named above. The depository (bank) is authorized to debit the same account.

This authority is to remain in full force and effect until Silverton Oil Company and the depository (bank) have received written notice from the undersigned of its termination in such time and in such a manner as to afford a reasonable opportunity to act on it.

I have read and agree to the terms of this EFT Authorization.
This authorization will remain in effect until written notice is received.

4 SIGNATURE

Signature: _____ Date: _____
SIGN HERE

Printed Name: _____

Thank you for your business!

Silverton Oil Company appreciates the opportunity to serve you.