

## **AUTOMATIC WITHDRAWAL REQUEST FORM**

REQUEST DATE:	
BORROWER NAME:	
WESTSTAR ACCT NUMBER:	
PAYOR BANK NAME:	<del></del>
PAYOR ABA ROUTING:	
PAYOR BANK ACCOUNT NUMBER:	<del></del>
ACCOUNT TYPE:	
TRANSFER AMOUNT \$	DATE OF FIRST TRANSFER:
FREQUENCY OF TRANSFER:	
BE AWARE FUNDS WILL NEED TO BE IN THE BANK ACCOUNT THE BUSINESS DAY PRIOR TO THE DATE OF THE SCHEDULED POSTING, AS THE DRAFTING PROCESS WILL BEGIN THE BUSINESS DAY BEFORE POSTING.	
	ifer occurs on a weekend or holiday, the draft will take place itten requests to stop drafts must be received by Weststar at cheduled draft.
Please accept this letter as your authorization to draft payments for the above-referenced account. A Voided check from the bank account is attached. I understand this service is provided as a convenience to me. Weststar Loan Servicing (Weststar) shall have no responsibility for the bank's failure to make the draft from my account or for bank changes relating to the draft. Weststar's liability is limited to the prompt drafting of the amount of total payment due. I understand it is my responsibility to inform Weststar of any monies drafted from my account by Weststar that should not have been.	
Payor Authorized Signature	
*Please include a voided check or printout from your bank showing the routing and account number.  This will ensure accuracy when the prenote is sent to your bank.	