

Corporate Authorization Form



Direct Deposit Instructions:

1. Enter company name, MC# or DOT #. Complete the Corporate Authorization Forms for companies that are incorporated, Consumer Authorization for LLC and other.
2. Please enter banking information including routing/transit number and account number. Must be a bank account in the United States. Please contact your bank with any questions you may have regarding this information.
3. Form must be signed by the authorized individual on the bank account or provide proof that the signer is authorized to designate remittance of funds.
4. All requested information must be completed and the form must be signed at bottom of page to initiate direct deposit. Items not completed will cause delays in establishing direct deposit.
5. You may use your Driver's License number as the individual ID# at the bottom of the Consumer Authorization Form under the signature.
6. Be sure to keep a completed copy of this form for your records.
7. Please note that once you have elected to enroll in direct deposit, all payments will be paid by direct deposit. Requests to cancel direct deposit must be completed in writing and signed by an authorizing legal representative.
8. Please mail completed form to: 8509 NW Gainesville Road, Attn: Tracy Diel, Ocala, FL 34475 or fax to: 352-732-9262, Attn: Tracy Diel. If sending by email, tdiel@dieljerue.com
9. Funds will be available the day following load settlement. If a load is settled on Monday, funds will be available on Tuesday. Funds will be available on Monday for loads that are settled on Friday. Settlement will be paid in US dollars. Please contact your bank concerning the bank's hold policy.
10. Please contact Tracy Diel at 352-877-7203 if you have any questions concerning the form or these directions.

Service Fee: \$25.00 per load. Service Fee to be deducted from net check.



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Generated on: January 27, 2022

Signed On: <https://dieljerue.com/>



-> Please use this form only if your bank account is commercial (not personal.) <-

Please feel free to contact Tracy Diel at [\(352\) 877-7203](tel:3528777203) if you have any questions concerning the form.

Corporate Authorization Form

Carrier Name:

MC #

DOT #

Corporate Account Holder Information:

Your Corporate Account Holder Name:

I **(we)** hereby authorize, Diel-Jerue, Inc. herein after called Originating Company, to initiate credit (debit) entries to our checking account indicated below at the depository financial institution named below.

Originating Company will use ***Diel-Jerue, Inc. - ACH*** as its Originating Company ID.

Receiving Depository Financial Institution:

Routing Number: *Specify transit routing number*



Account Number: Specify which account you are authorizing to be credited or debited.

This authorization is to remain in full force and effect until Originating Company has received written notification for Corporate Account Holder of its termination in such time and in such manner as to afford Originating Company a reasonable opportunity to act on it.

Corporate Account Holder (Must be signed by officer of the company);

Name:

Date:

By:

Name :

(Print or Type)

Title:

(Print or Type)

Service Fee: \$25.00 per load. Service Fee to be deducted from net check.

X



Signature Certificate

Document name: Corporate Authorization Form

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LEGALLY SIGNED USING
WPsignature
Build. Track. Sign Contracts.

Timestamp

January 27, 2022 3:08 pm
EDT

February 14, 2022 11:37 am
EDT

February 24, 2022 4:01 pm
EDT

February 24, 2022 4:37 pm
EDT

February 28, 2022 9:26 am
EDT

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Audit

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This audit trail report provides a detailed record of the
online activity and events recorded for this contract.

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