



# Metropark Parking Facility

c/o Nexus Parking Systems, LLC  
100 Middlesex Essex Tpke.  
Iselin, NJ 08830  
**(732)-906-1661**



|  |                             |  |  |  |
|--|-----------------------------|--|--|--|
| <b>Authorization to Pay for Parking via Electronic Direct ACH Payment</b>  |                             | <input type="checkbox"/> 1. Initial Start-up Authorization | <input type="checkbox"/> 2. Change of Financial Institution                                | <input type="checkbox"/> 3. Change of Account Number |
| 4. Customer Name: (Please Print)   |                             | 12. Current e-mail address:                                |  |  |
| 5. Telephone and Mobile Number:<br><br>and   |                             | 13.: Name of Financial Institution: (Please Print)         |  |  |
| 6. Customer Mailing Address:   |                             | 14 Financial Institution Mailing Address                   |  |  |
| 7. City:   |                             | 15. City:  |  |  |
| 8. State:  | 9. Zip Code:                | 16. State:   | 17. Zip Code:  |  |
| 10. NPS Account Number:  | 11. NPS Access Card Number: | 18. Account Number:  | 19. Type of Account:<br><input type="checkbox"/> Checking <input type="checkbox"/> Savings |  |
| 20. Date of ACH Debit:<br><b>Between the 25<sup>th</sup> to the end of the month</b>   | 21. Amount of Debit:        | 22. Financial Institution ABA/Routing Number:              |  |  |
| <p>I authorize <b>Metropark Parking Facility</b>, hereafter referred to as <b>COMPANY</b>, to initiate monthly debits on my account identified as and held at <b>FINANCIAL INSTITUTION</b> named above in the amount stated above, on or the date set forth by <b>COMPANY</b>. I certify that such account exists and agree to maintain in said account on and after said date sufficient funds to permit said debits to be effected.</p> <p>My authorization will remain in effect until I give written notice to terminate this authorization to the <b>COMPANY</b> at the address stated at least fifteen (15) business days before the date of the next scheduled debit on the 25<sup>th</sup> of the month. If the <b>COMPANY</b> does not receive the written notice, the scheduled monthly payment will be processed and is not refundable. In addition, I understand that the <b>COMPANY</b> or the <b>FINANCIAL INSTITUTION</b> can terminate the agreement by providing me with their written notice at least fifteen (15) days prior to actual termination.</p> <p>I have provided the <b>COMPANY</b> with a copy of a voided check solely for the purpose of verifying my account number and the <b>FINANCIAL INSTITUTION'S</b> routing number.</p> <p>I acknowledge that the origination of ACH transaction to my (our) account must comply with the provisions of U.S Law.</p> |                             |  |  | 24. Date:  |
| 23. Customer's Signature:  |                             |  |  |  |

### Direct Debit Application Directions:

1. Initial Start-up Authorization - Check this box if this is the first authorization given by you the customer.
2. Change of Financial Institution - Check this box if you the customer is requesting a change of your financial institution.
3. Change of Account Number - Check this box if you the customer is changing financial institution or designated account in the same financial institution.
4. Customer's complete billing name.
5. Customer's (home telephone and mobile).
- 6-9. Customer's complete mailing address.
10. Customer's NPS – Metropark Parking Facility account number. (On Invoice or Access card ex .1234).
11. Customer's NPS – Metropark Parking Facility monthly access card number. (If a tenant with multiple cards, enter in contact person's card #).
12. Current e-mail to receive receipt when processed on or about the 25<sup>th</sup> of the month.
13. The complete name of the financial institution to be designate as the debit account.
- 14-17. The financial institution's complete mailing address.
18. The exact account number of the checking or savings account in which the "Direct ACH Payment" will be made.
19. The type of account from which the debit will be processed.
20. The date when the debit will take place.
21. The exact dollar amount to be debited.
22. The financial institution's nine-digit routing number (found on the lower left-hand side of the customer's personal check).
- 23-24. Customer's signature and date. (IF NOT SIGNED, NEXUS PARKING SYSTEMS WILL NOT PROCESS).