



P.O. Box 3205
Lafayette, LA 70502
Telephone: (337) 504-2314
Fax: (337) 504-2085

Dear Customer:

The Lafayette Public Trust Financing Authority, (the “LPTFA”) now has the ability to set up automatic payment drafts for your LPTFA loan. If you would like to set up monthly automatic drafts, we have enclosed the needed form.

This form must be completed and returned along with a voided check from the checking account that you wish to start the auto draft.

If you are using a Savings account to have the funds drafted, please bring the Auto Draft Form to your financial Institution and have the bank representative complete the form LPTFA has provided.

All changes must be submitted in writing within 30 days of your next payment due.

If your payment cannot process due to Non-Sufficient Funds your bank account will be automatically charged a NSF fee in the amount of \$25.00.

Return all completed forms SIGNED along with a voided check to:

LPTFA
P.O. Box 3205
Lafayette, LA 70502

You may choose one of two dates listed on the Auto Draft form. Your payments can be deducted on the 1st or the 10th of each month.

If you should have any questions please contact us at:

servicing@lptfa.org or you may call: 337-504-2314

Thank You,

Lafayette Public Trust Financing Authority



AUTO DRAFT AUTHORIZATION

Borrower Name : _____ **Co- Borrower Name:** _____
Loan Number: _____ - ____ **RC**
Property Address: _____ **City:** _____ **State:** _____ **Zip:** _____
Current Address: _____ **City:** _____ **State** _____ **Zip:** _____
Email Address: _____ **Contact Phone Number:(____)** _____

Please check one of the following:

New Auto Draft request _____ Change to my current Auto Draft set up _____

Please select one of the below two options:

Monthly Drafting : 1st OR 10th (circle one) in the amount of my full mortgage payment.

I/We (hereinafter I/my) hereby authorize Lafayette Public Trust Financing Authority and its permitted successors and assigns to act as my/our agent to automatically draft my monthly mortgage payment.

Please attach a voided check with your form. Your request will not process without a voided check or auto draft form from your financial institution.

Deduct my required loan payment ONLY in the amount of \$____.____.

**Deduct my required loan payment of \$____.____ PLUS an additional \$_____ for principal.
(PLEASE CHECK ONE)**

_____ TO DRAFT FROM A CHECKING ACCOUNT, PLEASE ATTACH A VOIDED CHECK.

_____ TO DRAFT FROM A SAVINGS ACCOUNT, PLEASE INCLUDE A BANK STATEMENT WITH SAVINGS ACCOUNT AND ROUTING NUMBER.

Checking Account Number _____ Bank Routing Number _____

Savings Account Number _____ Bank Routing Number _____

At _____
Financial Institution Name **City/State** **Bank Representative completing form**

Phone Number _____

X _____ Date _____ X _____ Date _____
(Signature of Account Owner) (Signature of Account Owner)



Automatic Payment may take up to 30 days to process. Payment deductions may periodically be delayed by weekends, holidays or administrative interruptions. I/We understand that it is my /our responsibility to have funds available in my/our account on each payment date until the monthly payment is deducted. If your payment does not process due to non- sufficient funding there will be a \$ 25.00 NSF charged to your account automatically. As long as I/we meet this responsibility, my/our loan payment will be considered current and I/we will not have to pay any late charges. I/we agree to pay LPTFA a reasonable service fee for any payment deduction that LPTFA cannot complete due to insufficient or unavailable funds in my/our account, or for any interruption in the automatic payment that is requested or caused by me/us. I/We understand that the Auto Draft will be automatically cancelled if in any 6 month period there are 2 occasions where my/our payment cannot be deducted due to insufficient/unavailable funds. All changes must be submitted in writing to our office within 30 days of the next scheduled payment.

X _____ Date _____ X _____ Date _____
(Signature of Account Owner) (Signature of Account Owner)

Until LPTFA has processed your auto draft, please MAIL YOUR PAYMENTS TO:

**LPTFA
P.O. Box 3205
Lafayette, La. 70502**