Kenton County Fiscal Court Electronic Fu

Electronic Funds Transfer Agreement (ACH Credit)

ACH_2024_V1.0

ACH

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Submission	Reason for Submission:				
Questions	☐ New ACH Credit Authorization	☐ Revision to current ☐		☐ ACH Termination Request	
Q 0.000.00		1	tion (i.e. account or		
		bank chan	ges)		
General	Legal name/ Business name			Federal ID Number	
Information					
	Address (street and number)			Unit/Apt no.	
	City town or next office			7in Code	
	City, town, or post office		State	Zip Code	
	EFT Contact Person		EFT Contact Email		
	Phone no.	Ext.	Fax no.		
	Financial Institution				
	Financia institution				
Agreement	The Kenton County Fiscal Court is hereby requested to grant approval to the above named business to initiate Automated Clearing House (ACH) credit transactions to the bank account of the Kenton County Fiscal Court.				
	These payments must be in the National Automated Clearing House Association (NACHA) CCD+ format using				
	the Tax Payment Convention (TXP). I understand that the above named business is responsible for paying the				
	cost of initiating such transactions that may be charged by the business' financial institution. I acknowledge				
	that the origination of ACH transaction to my account must comply with the provisions of U.S. law. I, along				
	with the Kenton County Fiscal Court, agree to abide by all applicable ACH operating rules in effect. A				
	confirmation letter will be e-mailed to the designated EFT Contact Person detailing the Kenton County Fiscal				
	Court's routing number and designated bank account number. Any transmission errors are the responsibility				
	of the payer and their bank.				
	This agreement is to remain in full force and effect until the Kenton County Fiscal Court has received written				
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<u> </u>	notification from me of its termination so as to afford the interested parties a reasonable time to act on it.				
Signature	Authorized Signature			Title	
	Print Name			Date	
				MM/DD/YYYY	