



New York Community Bank

Member FDIC

Automatic Payment Plan Application

Borrower Name: _____ Loan Number: _____
 Property Address: _____ Home/Cell Phone: _____
 _____ Work Phone: _____

Please Note: When you sign up for the automatic payment plan, continue to make your loan payments (by mail, online or phone) until you receive notification that the program has been set up. The notification will include the first withdrawal date and amount.

>> Bank Account Information

Banking Institution Name: _____
 Account Holder Name: _____
 Checking Account Number: _____
 Bank Routing Number: _____



>> Automatic Payment Amount

Current Monthly Payment \$: _____ Additional Principal Amount (optional) \$: _____
 Additional Escrow Amount (optional) \$: _____

>> Automatic Payment Withdrawal Date

You request and authorize New York Community Bank to electronically withdraw monthly payments plus any additional principal you authorize from your personal bank account on the withdrawal date you choose. If the day you select falls on a bank holiday or weekend, the payment will be deducted from your account on the next business day.

Payments are typically due on the first day of each month. The withdrawal date may be up to 14 days past your due date. **See your loan agreement for specific due date and grace period.**

Circle the day of the month you would like us to withdraw your payment:

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15

If you do not choose a date, or if you choose a withdrawal date that is not permitted, New York Community Bank will withdraw the payment on the payment due date. HELOC account payments are typically not due on the first day of each month, so they will automatically be withdrawn on the payment due date.

>> Please Review These Terms and Conditions

In order to provide convenient monthly payments on my mortgage loan with New York Community Bank ("Bank"), its successors and/or assigns, I request and authorize New York Community Bank, as my agent, to transfer funds from my designated account to my loan. The amount authorized to be transferred each month will be at least the amount of the minimum monthly payment, according to the Note. However, as indicated in the Automatic Payment Amount section of this form, I understand that I can elect to transfer additional principal and/or escrow amounts to be paid. If the amount of my minimum monthly payment changes because of the terms of my Note, the required escrow (tax and/or insurance) payment, or because of other changes, the automatic loan payment will change accordingly. The Bank will provide notification of payment change at least 10 days prior to the payment due date. Either I or New York Community Bank can terminate this authorization or stop payment at any time by giving written notice to the other party at least three (3) business days prior to the date of the authorized transfer.

I hereby acknowledge that I have read this agreement and agree to its terms. I agree to retain a copy for my records.

Borrower Signature: _____ Date: _____
 Account Holder Signature: _____ Date: _____

>> Important! Remember to Tape a Voided Check Here

Please mail the completed form and your voided check to:

New York Community Bank
 Attn: Cash Processing • Mail Code OH99-0719
 PO Box 94895 •
 Cleveland, OH 44101-4895