

ELECTRONIC FUNDS TRANSFER AUTHORIZATION AGREEMENT

Borrower Name: _____ Co-Borrower Name: _____
Caliber Loan Number: _____ Due Date: _____ Late Charge Day: _____

I (we) hereby authorize and request Caliber Home Loans, Inc. ("Caliber") to initiate electronic debit entries or effect a charge by any other commercially accepted practice to my (our) account (the "Account") at the financial institution named below ("Bank") under this Electronic Funds Transfer Authorization Agreement ("Agreement").

Draft Option (choose one Draft Option and complete applicable required information):

- Monthly* Draft Day (choose day of the month, e.g., 1st, 2nd, etc.)
Biweekly** Circle day of week: Monday Tuesday Wednesday Thursday Friday
Semi-Monthly*** Please select two days of the month you want your payment processed: 1st Draft 2nd Draft

*Eligible Monthly draft dates are between the contractual payment Due Date and up to one day before the Late Charge Date. Example: If the Due Date is the 1st and the Loan has a 15 day grace period before a late charge is assessed, the Draft Date may be any date between the 1st and the 15th of the month.

**If my (our) Loan was originated as a bi-weekly loan, all payments must be drafted on the actual due dates set forth in the Loan documents. If Loan was not originated as bi-weekly, the loan must be prepaid one full month in order to sign up for bi-weekly drafts.

***Your Semi-Monthly date selection has to be in between your grace period. (No Additional Principal can be added to this payment).

I (we) acknowledge that the amount of the payment drafted may change in accordance with any payment changes authorized by the Loan documents (such as those resulting from an interest rate or escrow change). I (we) may also choose to have a fixed amount drafted for additional principal (curtailment), if I (we) have chosen the Monthly draft option.

Total Drafted \$ _____

I (we) agree that if advances, fees, or late charges are assessed to the Loan after automatic drafts begin, any future curtailments may be applied to those items, per the terms of the Loan documents.

Account Holder: _____ Type of Account (mark one): ___ Checking ___ Savings

Name, Address, and Phone Number of Bank: _____

Bank Account Number: _____ 9-Digit Routing Number: _____

(Note: Verify the routing number with Bank. The signers on the deposit account must match the names on the Loan.)

Each month, Caliber will debit my (our) Account for the amount of my (our) payment on the draft date(s). If my (our) Account does not contain sufficient funds for my (our) payment or if the Bank refuses to allow the draft of my (our) payment, I (we) will be responsible to Caliber for any fees or charges related to insufficient funds, bad checks and late payments charged by Caliber, unless such fees or charges are prohibited by the Loan documents or applicable law.

I (we) will receive an acknowledgment letter from Caliber confirming the amount and the date of the initial debit when my (our) authorization has been processed. Until I (we) receive such letter, I (we) shall continue making our Loan payments through my (our) usual process (e.g., check or through my (our) Bank).

By my (our) signature below, I (we) hereby agree to the terms of this Agreement, certify my (our) authority to enter into this Agreement and the accuracy of the Account information and acknowledge receipt of an additional copy of this Agreement.

Signed _____ Printed Name _____ Date _____

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