



DIRECT DEPOSIT / DEBIT AUTHORIZATION FORM

Real Mortgage Associates, Inc. will provide direct deposit processing of your commissions earned into your bank account. Deposits will be processed weekly. We require that this form be completed and signed, along with a 'VOID' cheque, to be set-up for this service.

Name:

Address on Record with bank:

Social Insurance Number:

Financial Institution Details	
Name:	<input type="text"/>
Branch Address:	<input type="text"/>
Account Number:	<input type="text"/>
Transit Number:	<input type="text"/>

Payments to Business Holding Account
<p>This will confirm that _____ (Insert Mortgage Consultant Name) who is registered with Real Mortgage Associates, Inc (4462), has requested to have their commission payment made to their wholly owned business company _____ (Insert Business Name) account.</p> <p>The Mortgage Consultant agrees that the above referenced company:</p> <ul style="list-style-type: none">- is authorized to receive commission payments for the Mortgage Consultant- does not invest in mortgages- does not arrange or deal in mortgages- does not accept trust funds- does not syndicate mortgages.

<p>I hereby authorize Real Mortgage Associates, Inc. to process by commission payments to MY above referenced account. I further authorize Real Mortgage Associates, Inc. to process debit entries (including FSCO/CIMBL/E&O Ins.) and adjustments for any deposit made in error. A record of all transactions is to be provided to me.</p> <p>Signature: Dated:</p> <p>In the event that multiple signatures are required for debit entries, those individuals must also agree and sign.</p> <p>Signature: _____ Dated: _____ dd/mm/yy</p>
