



#BV-BRK-ACH

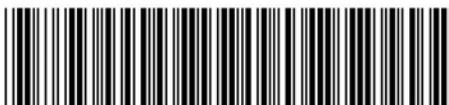
Residential Electronic Funds Transfer Authorization

Please complete the form below and mail back to Bayview Loan Servicing, at 4425 Ponce De Leon Boulevard, 5th Floor, Coral Gables, FL 33146. Please contact Customer Service with any questions by calling 1-800-457-5105 or visitinV_www.BayviewLoanServicing.com. Please note that Bayview reserves the right to discontinue this service without prior notice. For purposes of this authorization, "I," "my," "me" and "Borrower" refer to the Borrower named below.

Form with fields: Loan Number, Borrower Name, Mailing Address, Type of Account (check one), Bank Name, Bank Address, Name on the Bank Account, Bank Account Number, Bank Routing Number (ABA Number), Total Amount of Withdrawal, Due Date, Withdrawal Date (Check one).

If the Withdrawal Date I select does not fall on a business day, my account will be debited on [or after] the next business day. All due dates and late payment penalties will continue to apply as per the terms of my loan agreement regardless of the date selected for withdrawal.

- 1. I hereby authorize Bayview Loan Servicing, its agents, successors and assigns ("BLS"), to debit on a monthly basis the Bank Account specified above or any substitute bank account I later specify (the "Account") in the amount of the Total Amount of Withdrawal specified above via an Automatic Clearing House (ACH) or similar electronic debit on or after the Withdrawal Date selected above.
2. Each month I will receive a billing statement, which will show the total amount due on my loan, and may include amounts allocated to my escrow. I understand that for purposes of this Authorization, my billing statement will in all cases be sent to me at least ten (10) days before the scheduled payment date.



3. I authorize BLS to debit any late or returned payment fees from my Account. I authorize BLS to initiate a separate debit for the amount of the fee [or to add the amount of the fee to debit authorized above]. (Fees are accessed in accordance with State Law and/or Loan Documents)
4. BLS will confirm the exact date my first payment will be automatically withdrawn from my account after my Trial Plan Period is complete, if applicable.
5. If my loan is currently delinquent, automatic debiting will not begin until my loan is made current, as BLS only drafts payments on current loans. If at any time after executing this Authorization, my loan falls delinquent, the debiting of payments will be suspended until my loan is once again brought current.
6. Instead of or in addition to any debits authorized above, I authorize BLS to initiate any debit that I subsequently confirm by phone, e-mail or text message.
7. I agree that BLS may reinitiate any debit to my Account that is unsuccessful and that BLS may initiate a credit or debit, as applicable, to my Account to correct any error that BLS makes in seeking a payment.
8. To ensure no late charges are assessed, I should select a Withdrawal Date PRIOR to the end of my monthly grace period. If, in setting up electronic payments, BLS determines that the day I elected for debits is after the end of my grace period, BLS may contact me for an updated Authorization form with a Withdrawal Date prior to the end of my grace period. [However, BLS is under no obligation to contact me and, I understand that, if I do not change my Withdrawal Date, I will incur a late fee.]
9. Both BLS and I have the right to cancel this Authorization at any time. I must notify BLS of my desire to stop payment at least three (3) business days before the Withdrawal Date on which I wish the cancellation to take effect by notifying BLS in writing at 4425 Ponce de Leon Blvd., 5th Floor, Coral Gables, FL 33146 or calling BLS at 1.800.457.5105. If three Auto Pay payments are returned within a 12 month period, your Auto Pay will be subject to cancellation. Also, if you are setup on Auto Pay, and have not drafted an Auto Pay payment in the last 120 days, your Auto Pay will be deleted.
10. I understand that my bank may impose its own fees in connection with returned or rejected debits, and I agree that BLS does not have any liability regarding any such fees.



The terms of this Authorization do not modify the terms of my loan. By signing below, I hereby agree to the terms stated above, as well as acknowledge receipt of a copy of this Authorization that I may retain.

(Print Borrower Full Name)

(Borrower Signature) Date: _____

(Print Co-Borrower Full Name)

(Co-Borrower Signature) Date: _____

(Print Bank Account Holder's Full Name)*
**If different from Borrower*

(Bank Account Holder's Signature)*
**If different from Borrower* Date: _____