



BV OIL COMPANY

ELECTRONIC FUNDS TRANSFER (EFT) AUTHORIZATION AGREEMENT FORM

We, _____ authorize BV Oil Company, hereinafter called BV, to initiate debit entries to our checking account indicated below and the depository named below, hereinafter called Bank.

Bank Name: _____

Branch (if any): _____ City: _____

State: _____ Tel. _____

Contact Name (if any): _____

Transit/ABA Number: _____

Account Number: _____

*Please include a voided check when submitting this authorization agreement.

This authorization agreement is effective as of the signature date below and is to remain in full force and effect until BV has received written notification from me of its termination in such time and manner as to afford BV and the BANK a reasonable opportunity to act on it. I agree with all terms of this agreement and confirm that I am an authorized signer on this account and authorized by our company to initiate the EFT.

Company Name _____

Address _____ City _____

State _____ Zip _____ Tel: _____

Printed Name _____ Position _____

Signature _____ Date _____