Universal Traffic Service, Inc.
Accounts Payable
PO Box 888470
Grand Rapids MI 49588-8470

Phone: 616-698-8038 x1305
Email: AccountsPayable@UTSnet.com

ELECTRONIC FUNDS TRANSFER (EFT) AUTHORIZATION FORM

This form authorizes UTS to deposit your payments directly into your financial account

Are you interested in our Quick Pay program? YES ☐ NO ☐

Company Name: _____

Address: _____

_____

Contact Name: _____

Contact Phone: _____ **Fax:** _____

Email Address(es) (REQUIRED): _____

_____

BANK/FINANCIAL INSTITUTION INFORMATION: *PLEASE ATTACH A VOIDED CHECK*

Bank/Financial Institution: _____

Address: _____

_____

Account Name: _____

Routing Transit Number: _____ **(Must be 9 DIGITS)**

Account Number: _____

Account Type: _____ **SAVINGS** _____ **CHECKING**

SIGNATURE: _____ **DATE:** _____

I authorize Universal Traffic Service Inc. and the financial institution named above to automatically debit/credit our account. This includes my authorization to reverse any credit entries made to my account in error. The authority will remain in effect until I give written notice to cancel it.

Please attach a voided check.
EFT requests will not be processed without a voided check

EFT's normally deposit to your designated account on Fridays. Exceptions may occur for holidays and other reasons.
Payments made through our Quick Pay program are deposited within three business days.

REMITTANCE INFORMATION WILL BE EMAILED TO THE ACCOUNT(S) LISTED ABOVE.
EFT REMITTANCES ARE ALSO AVAILABLE ON OUR WEB SITE
carriers.myUTS.net