

ACH ENROLLMENT FORM



I _____ with _____ authorize Ocean Lineage to
(Owner Name) (Customer / Company name)
transfer money from our checking account, as indicated below, for the purchase of goods and services.

This is an open authorization to allow transfers from the account listed below for all orders placed with Ocean Lineage. Amounts will vary per transaction, based on the order amounts.

Please check and option if it is applicable:

- Add this bank account as the primary resource to be ran for all orders when payment is due.
- Add this bank account as a backup/secondary payment option to be ran if my account is 30 days or more past invoice date. I understand and agree to the terms of the 3% late fee per month for all payments processed for orders 40 days after shipment.

I have read and agree to all of the terms and conditions in the ACH Enrollment Form and Ocean Lineage Dealer Agreement, or any other document that accompanies this agreement. I certify that I am the authorized account holder for this Bank Account.

I understand this is a legal binding agreement between Ocean Lineage and _____
(Bank signers name)

Authorized Accountholders Signature (REQUIRED)

Date (REQUIRED)

Financial Institution _____

(Circle One) Checking, Savings

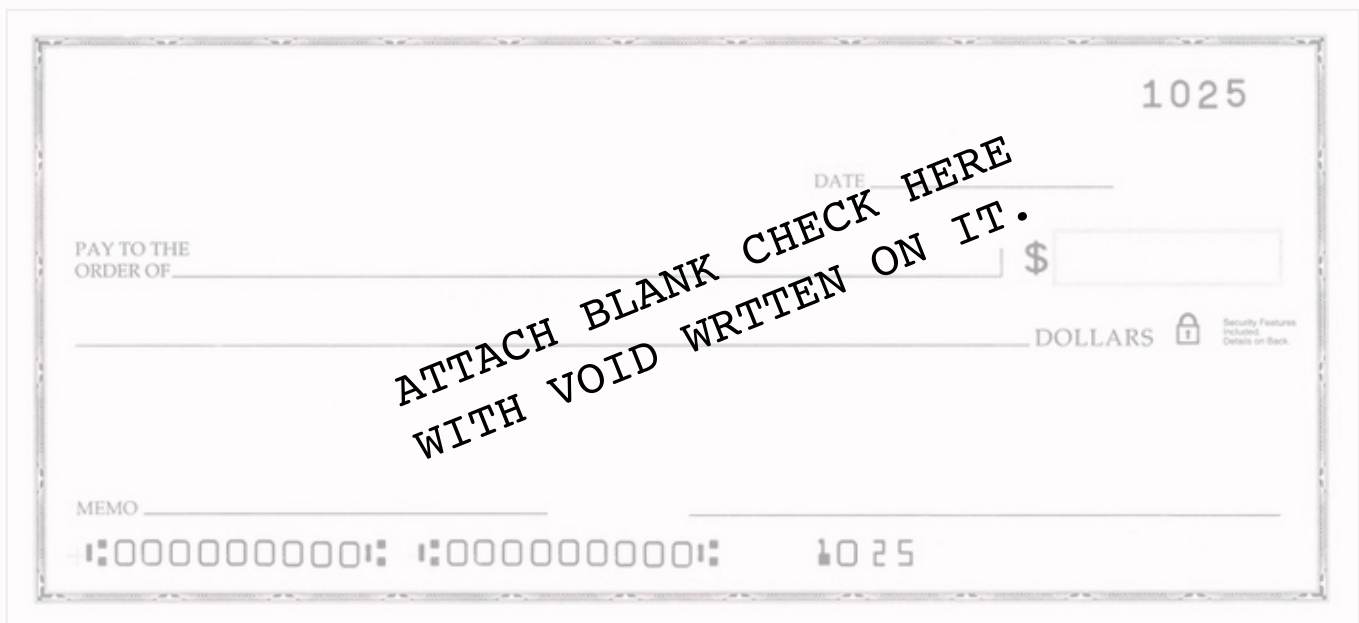
Bank Account Number: _____

Routing Number: _____

Name on Account: _____

Contact Person: _____

Phone Number: _____



Please fax form to 888-553-4841 or mail to Ocean Lineage; 18124 Wedge #2007 Pkwy, Reno, NV 89511

Once form is received your bank account will be on file.