



ST. LOUIS RECYCLING & WASTE SOLUTIONS

PAYMENT OPTIONS, AUTHORIZATION & AUTOPAY ENROLLMENT

Payment Options (no fee)

ACH & Credit Cards: Individual emailed invoices may be paid directly online by entering the ACH or Credit Card information into the secure payment portal after selecting the black button/link "Pay Invoice." Payment methods may be saved online for future use. *Invoices are not paid automatically unless enrolled in AutoPay.

AUTOPAY: Avoid late fees, processing time and labor with auto-recurring payments. By completing the form portion below, our merchant bank processor will collect the ACH (or) Credit Card payment and apply to your recurring invoices automatically, sending a payment receipt via email for each successful transaction. ***If your firm would like to enroll in AutoPay, please complete the information required below and email completed form to: Support@stlouisrecycling.com

Check Payments: Accounts below \$50.00 per month are required to either a) self-pay invoices online, b) enroll in AutoPay, or a \$2.50 check processing fee applies.

Payment Options (fee)

"Push" ACH Transfers: your firm may send ("push") ACH payments to our bank. Since these deposits can be made without our knowledge, we request an email notification per ACH payment sent in order to reconcile payments with invoice(s) in real-time. This payment convenience incurs a \$5.00 processing fee per invoice added to the account monthly. In the event your firm or bank cannot/does not send email notices with each ACH, a \$25.00 administrative fee applies. *To send via push ACH, email your request to: Support@stlouisrecycling.com, for our bank deposit information form.

Electronic Recurring Payment Authorization

I, _____, of _____, authorize St. Louis Recycling & Waste Solutions to process
(print full name) (company name)

a one-time payment for a single event (or) automatic monthly payments for recurring services via the method below for the total balance due.

BILLING Address _____

City, State, Zip _____

Email Receipt to: _____

Phone: () _____ - _____

Credit Card Information

ACH Bank Draft Information

Visa MasterCard Amex Discover

Checking Savings

Cardholder Name: _____

Name on Account: _____

Card Number: _____

Banking Institution: _____

Exp. Date: ___/___/___ CVV Code _____ ZIP _____

Bank City, State, Zip: _____

Please Note: Credit Card date expirations and/or changes to information regarding the account holder remains the Client's responsibility to keep payment methods valid at all times. We kindly ask that you notate the expiration date and set a calendar reminder 30 days in advance for the purpose of updating your account's payment method on file.

Bank Phone Number: _____

Account Number: _____

Routing Number: _____

AUTHORIZED BY: _____
(signature)

_____ **DATE:** _____
(position/title)

By signing above, I understand and agree to the terms listed above and herein, including the following: a) recurring payment authorizations will remain in effect until canceled *in writing or via email receipt confirmed by Service Provider*; b) Client must notify Provider *via email* of any changes to the AutoPay Billing Authorization, or cancellation of this authorization, at least seven (7) days prior to the next billing date or a Rush Admin Fee of \$25.00 will apply; c) payment dates which fall on a weekend or holiday may be executed on the next business day; d) any transaction rejected for Non-Sufficient Funds (NSF) may be attempted again within 1-7 days with an additional \$39.00 charge for NSF, which will be initiated as a separate transaction and may require a new form of payment; e) the origination of all transactions must comply with the provisions of U.S. law and anyone who completes this form certifies that he/she is an authorized user of the bank account or credit card and will not dispute these scheduled transactions with the bank or credit card company as long as the transaction(s) correspond to the terms indicated in this authorization and/or from subsequent Client documentation or communications; f) in no case will this authorization supersede nor circumvent the most recent publicly-available version of St. Louis Recycling & Waste Solutions' standard Service Terms & Conditions.

***CLIENT has read the payment policies listed above and elects to DECLINE automatic monthly payments.** CLIENT INITIALS: _____