



# TOOL FLEET MANAGEMENT



## Reoccurring Bank Authorization Form (U.S.)

Date \_\_\_\_\_

### I certify,

- that I am a signer on the account listed below with the authority to grant this authorization on behalf of *(Name or Customer Name)* \_\_\_\_\_.
- that Customer has entered into a Fleet Management Agreement with Hilti, Inc. ("FMA")
- that Hilti, Inc. and any of its agents, is authorized to debit the account for the amount of the FMA Total Monthly Fees
- if provided debt information I authorized the charges be paid via draft (ACH) or other Electronic Funds Transfers (EFT), in accordance with the terms of the FMA and that Customer's Bank is hereby requested, authorized and directed to honor and to treat as authorized, checks, drafts or money drawn in Customer's name in accordance with this authorization.
- that in the event that any such draft, EFT or charge returned unpaid, I agree, in addition to paying such draft, EFT or charge, to have the account debited electronically, or drafted for an item fee of \$25.00, plus any applicable taxes.
- that I authorize Hilti, Inc. to initiate reoccurring drafts on the account to pay reoccurring fleet contract obligations as they become due.
- that in the event that additional products are added to the FMA I agree to the associated increase of my monthly debit charge amount without prior notice.
- that this authorization by \_\_\_\_\_ *(Name, Title and Company Name)* shall remain in full force and effect and the authority herein given to Hilti, Inc. shall remain irrevocable until Hilti, Inc. receives written notice from Customer of revocation of such authority. Revocation shall not affect any action taken prior to receipt of such notice, nor shall it relieve Customer of its payment obligation or otherwise affect the terms of the FMA.

Company / Customer Name \_\_\_\_\_

### Direct Debit

ABA # / Route # \_\_\_\_\_

Bank Name \_\_\_\_\_

Bank Account # \_\_\_\_\_

### Authorized Signature

Printed Name \_\_\_\_\_

Hilti Account Number \_\_\_\_\_

Phone Number \_\_\_\_\_

*Please Note: You will continue to receive invoices for your records.*

All charges will occur on the last business day of the month for that month's billing.

Please email form to:  
[ElectronicPayment@hilti.com](mailto:ElectronicPayment@hilti.com)