



AUTHORIZATION FOR DIRECT PAYMENT VIA ACH

Borrower authorizes AEGON USA Realty Advisors, LLC (“Servicer”), as servicer for, Equitable Financial Life Insurance Company/Equitable AgriFinance, LLC to electronically debit the following account:

Borrower Name ("Borrower"): _____ Loan Number: _____

Depository Name ("Depository"): _____ Account Number: _____

Routing Number: _____ Amount of Debit(s): _____

Checking Account

Savings Account

First ACH Month: _____ Frequency: (i.e. monthly) _____

Date of debit: 1st calendar day of month

If the draft date falls on a weekend or a bank holiday, the draft will occur on the next business day.

PLEASE SEND EITHER A VOIDED CHECK OR A LETTER FROM YOUR BANK ON ITS LETTERHEAD WITH THE ROUTING AND ACCOUNT NUMBER, ALONG WITH THIS COMPLETED FORM TO:

AAMServicing@AEGONUSA.com

This authorization and any subsequent change or revocation may not take effect for up to fifteen (15) calendar days after notice to the Servicer. Borrower may revoke this authorization or change the bank account by written notice delivered to 6300 C Street SW; Cedar Rapids, IA 52499-5443 or by e-mail to AAMServicing@AEGONUSA.com.

This authorization extends only to scheduled payments specifically required under the loan documents, including changed payment amounts. It does not apply to the payment due on the maturity date, which shall be paid by check or wire transfer. If your loan requires “escrow” payments for taxes, insurance premiums, or similar expenses, and if the escrow payment changes, we will advise you at least ten (10) days before debiting your account. Unless you challenge the new escrow amount, this authorization will extend to it.

If for any reason we do not receive an authorized payment that we have attempted to process, you must pay by other means. If funds were available but the transfer failed, we will waive any late fee. Otherwise, the late fee shall apply. We reserve the right to require future payments by check or wire if two such late fees are incurred.

If we make a mistake handling a payment, we will correct it promptly. You agree that the correction shall resolve any related claim, including for consequential damages. You release us and the lender from any claim that ACH payments are not permitted by law or under the loan documents.

To view information about your loan, please contact us regarding our Borrower Viewpoint online service. If you have any questions, please contact us at AAMServicing@AEGONUSA.com.

I have read and acknowledge the foregoing terms and conditions and acknowledge that I am authorized to execute this “Authorization for Direct Payment via ACH” Form:

Name(s): _____

(Please Print)

Signature(s): _____ Date: _____