



# Empire Livestock, LLC.

P.O. Box 117 · Loganton, PA 17747 · 570-215-3353

## Customer / Vendor Information & ACH Authorization

Please provide the following information to establish an account with Empire Livestock, LLC. All requested information is needed to ensure proper account creation and ACH payments.

Name: \_\_\_\_\_; Farm / Business Name: \_\_\_\_\_

Email Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Physical Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
(If different from mailing address)

Primary Contact #: \_\_\_\_\_; this number is a:  cell  business

Alternate Contact #: \_\_\_\_\_; this number is a:  cell  business

**Market Location:** Please check ALL the markets that you may sell/buy at/from:

Bath       Central Bridge       Cherry Creek       Dryden       Pavilion       Vernon

## Direct Credit Vendor Payment Authorization (ACH)

I elect NOT to participate in ACH payments

I, \_\_\_\_\_ (**Vendor**), hereinafter called Vendor, hereby authorize **Empire Livestock, LLC (Company)** hereinafter called Company, to initiate credit payment entries to my / our account indicated below at the depository financial institution named below, hereinafter called **Depository**.

Depository Bank Name: \_\_\_\_\_

Routing/Transit Number: \_\_\_\_\_ Account No.: \_\_\_\_\_

Indicate Type of Account:     Checking     Savings     Business Checking Account

This authorization will remain in full force and effect until the **Company** has received written notification from the Vendor of its termination in such a time and in such a manner as to afford **Company** and **Depository** a reasonable opportunity to act on it.

## Customer / Vendor Authorization

Authorized Name: \_\_\_\_\_

Authorized Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Note: In the event of revoked authorization all written authorizations must be revoked only by notifying the originator (**Company**) in writing no later than 15 days before the next transaction effective date.

**Please forward this form with a voided check via one of the following methods if electing ACH payments:**

1. Give to the Office Staff at one of the six (6) auction markets, OR
2. Mail form Empire Livestock, LLC., PO Box 117, Loganton, PA 17747-0117, OR
3. Email to [billing@empirelivestock.com](mailto:billing@empirelivestock.com)