



**Heartland Capital Investments, LLC**

PO Box 409  
Mayfield, KY 42066  
T 888-850-1187  
F 620-343-4570

**EXHIBIT A**

**AUTHORIZATION AGREEMENT FOR DIRECT PAY**

I hereby authorize Heartland Capital Investments, LLC, hereinafter called Heartland, to initiate credit entries to my account indicated below at the depository financial institution named below, hereinafter called DEPOSITORY, and to credit the same to such account. I acknowledge that the origination of ACH transactions to my account must comply with the provisions of U.S. law.

The purpose of these credit entries will be for Heartland to remit funds for portable storage buildings and other account payable needs.

**DEALER INFORMATION**

Company Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

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

E-mail Address: \_\_\_\_\_

**ACCOUNT INFORMATION**

Account Type (circle one):                      Checking                      Savings

Company Account Number: \_\_\_\_\_

Company Bank Routing Number: \_\_\_\_\_

This authorization is to remain in full force and effect until HCI has received written notification from me of its termination in such time and in such manner as to afford HCI and DEPOSITORY a reasonable opportunity to act on it.

**SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**Please send this form and a voided check to us via fax (620-343-4570) or e-mail to [dealers@hci.net](mailto:dealers@hci.net).**

**OFFICE USE**

Receipt ID: \_\_\_\_\_ Setup Date: \_\_\_\_\_

By: \_\_\_\_\_