



**TRINIDAD & TOBAGO POLICE CREDIT UNION
CO-OPERATIVE SOCIETY LIMITED**

AUTOMATED CLEARING HOUSE (ACH) REQUEST FORM

Kindly complete this form in BLOCK LETTERS. Please provide all required information listed below.

Member's Name: _____

Account #: _____

ACH DETAILS

Bank statement attached: Yes No

Name on: _____
Payee Account

Bank Name: _____

Branch: _____

Account #: _____

Amount: _____

Purpose: Loan Standing Order Personal Payment

ACH Disclaimer

The Trinidad and Tobago Police Credit Union Co-operative Society Limited shall make every effort to provide accurate and timely service to you, our members.

PLEASE ENSURE THAT THE BANKING INFORMATION PROVIDED FOR YOUR ACH TRANSFER IS ACCURATE AND COMPLETE.

The Trinidad & Tobago Police Credit Union Co-operative Society Limited, shall not be liable for any discrepancies or problems resulting from inaccurate or incomplete information you have provided.

Member's Signature: _____

Date of Request: _____

FOR OFFICIAL USE ONLY

Witnessed By: Name: _____

Signature: _____

Date: _____