



AGENT ACH ACCOUNT SET UP

Date: _____

Agency Name: _____

Address: _____
Street City State ZIP

Contact: _____ **Phone:** _____

In order to set up your ACH account, please supply the following information:

Bank Name: _____

Address: _____

Bank Contact: _____

Bank Phone: _____

Account Name: _____

Account Number: _____

Routing Number: _____

Optional – Funding Notification may be sent to 1 fax # & 1 email address

Fax # _____ **Email address** _____

Complete and return to Attn: Agent Services via facsimile (303)571-1250 or by e-mail to AgentServices@FlatironCapital.net