ARAPAHOE BASIN COLORADO

**Dundee Resort
Development, LLC**

dream ☁

Authorization of Electronic
FundsTransfer (EFT)

Supplier # (if known): _____

Supplier name: _____

Supplier mailing address: _____

The information provided in this authorization will be used for the purposes of administering payment to the Supplier, and will not otherwise be disclosed by Arapahoe Basin except as required or permitted by law. Authority is hereby granted to Arapahoe Basin to electronically pay any amounts owing by Arapahoe Basin to the Supplier from time to time. The amounts owing to the Supplier should be deposited into the Supplier's account per the information provided below.

Bank name: _____

Bank address: _____

ABA/Routing #: _____ Account #: _____

Account name: _____

Account address: _____
(If different from supplier mailing address.)

Arapahoe Basin will advise Supplier of any payments made directly to the above described account.
E-mail to be sent to the following e-mail address:

**Email:** _____

**Contact name:** _____ **Phone:** _____

**By executing this form, the Supplier agrees:**

1.  That this authorization will remain in full force and effect until revoked by Supplier by providing Arapahoe Basin with at least 10 days prior written notice.

2.  That Arapahoe Basin will not be required to pay any late fees if the funds remitted are not credited to the Supplier's account through no fault of Arapahoe Basin

3.  To promptly return any over-payments made by Arapahoe Basin to the Supplier.

4.  To promptly advise Arapahoe Basin of any changes to information contained in this form.

5.  To provide all notices pertaining to this authorization, including the provision of an:

    a)  executed copy of this form and voided check, OR

    b)  letter signed by an official from the Supplier's bank confirming the Supplier bank account information is correct

Acknowledged & agreed this: _____ Day of _____ 20 _____

Name: _____

Title: _____

I have authority to bind the corporation.
I confirm that I have conformed to all
document requirements and that all forms
returned to Arapahoe Basin are originals.

When completed, EMAIL form and void check or letter from bank to **AbasinEFT@dream.ca**
**Please add this email address to your trusted contacts to ensure receipt of our communications.**