

## AUTO PAY Enrollment Form and Authorization Agreement

## **Step 1** Please complete this Authorization Agreement: I (WE) hereby authorize Santander Consumer USA Inc. to debit the monthly payment owed to Santander Auto pursuant to my (our) motor vehicle retail installment contract, including any late fees, NSF fees, or other amounts then due as described in the contract, automatically on the monthly payment due date set forth in said contract from my (our) below-described bank account. Santander Consumer USA may cancel this authorization at any time. I (WE) may cancel this authorization by contacting Santander Consumer USA orally or in writing and said cancellation shall be effective three (3) business days after Santander Consumer USA Inc.'s receipt of the request. I (We) have the right to receive written notice at least twenty one (21) days before the scheduled date of a monthly payment debit if the debit will be different in amount from the prior debit made under this Agreement, or different from the contract payment amount (plus any late charges, NSF fees, and other fees and charges that may be due). I (We) also have the option of receiving this written notice only if a debit falls outside a certain dollar range, or only when a debit will differ from the most recent debit by more than a certain dollar amount. You authorize Santander Consumer USA to cancel your Auto Pay if on any scheduled payment date, the amount of your scheduled Auto Pay payment is greater than the pay-off amount on your account. Borrower's Full Name (Please print) Borrower's Signature Co-Borrower's Full Name (Please print) Co-Borrower's Signature If payment is to be drawn from checking or savings account of someone other than the Santander Consumer USA Inc. account holder, please complete the following information: Authorized Signature on account Authorized Name on account **Step 2** Please complete Enrollment Information: Account Type (please check one) Checking Savings Santander Auto Account Number **Contract Payment Amount ABA Routing Number** Financial Institution Account Number Financial Institution's Address (City, State and Zip) Financial Institution's Telephone Number Day Of Month/Due Date Start Date Step 3 Mail or Fax form to Santander Consumer USA Inc.: Complete and sign this form and return with a voided check to the address or fax number below: Fax to: 1-800-417-0251 Mail to: Santander Consumer USA Inc. P.O. Box 562088 Dallas, Texas 75356



Special Acknowledgments. You understand (i) the Vehicle and other goods, products and services related to the contract, as well as the funding for your credit transaction, come in whole or in part from sources outside this state, which constitute interstate commerce within the meaning of the Federal Arbitration Act; and (ii) a court or jury will not hear or decide any Claim governed by this Agreement. You further acknowledge that you have been informed of the consequences of failing to make the first or future deferred installment payments in a timely manner under this Agreement.

**TELEPHONE MONITORING.** You consent to and agree that Santander Consumer USA, Inc. may monitor and record telephone calls made or received by Santander Consumer USA, Inc. or its agents regarding the Contract or your account to assure the quality of our service or for other reasons.

## CONSENT TO TELEPHONE / CELL PHONE CONTACTS AND USE OF AUTOMATION TO CONTACT

**YOU.** In order for us to service the Contract or your account or to collect any amounts you owe, you consent to and agree that SCUSA may make calls to you using prerecorded/artificial voice messages and/or through the use of an automatic dialing device at any telephone number you provide to SCUSA, any other telephone number currently associated with your account or any telephone number obtained at any time by SCUSA in connection with the Contract or your account, including a mobile or wireless telephone number or other device that could result in charges to you. Your express consent applies to any email address or telephone numbers we obtain or you provide in any manner and at any time, including an email address or cellular telephone number for which you may incur voice, data or other charges.

You agree and understand that your authorization may be revoked at any time via (i) telephone by calling SCUSA at 1 (888) 222-4227 or (ii) written correspondence to Santander Consumer USA, Inc., Attn: Revocation, P.O. Box 961245, Fort Worth, TX 76161 or (iii) electronic mail at stopcalls@santanderconsumerusa.com.

This Agreement may be executed in one or more counterparts, each of which when so executed shall be deemed to be an original. This Agreement may be executed by facsimile signatures, and shall be valid and binding on any party signing this Agreement in such fashion. You agree to sign and return this Agreement to Santander Consumer USA, Inc.at the address and fax number shown above.

Santander Consumer USA Inc.	Borrower	Date	
	Co-Borrower	Date	