



# SIPAHİ HUNTING AND TACTICAL INC.

## Blanket ACH Payment Authorization

AVCLAR Since 1989 SEFANDY  
KONYA NEW JERSEY FLORIDA  
ESENYURT ISTANBUL

Sign and complete this form to authorize SIPAHİ HUNTING AND TACTICAL INC. to process ACH transactions to pay for any current or future invoices, with your authorization. This Agreement governs ACH transactions initiated by SIPAHİ HUNTING AND TACTICAL INC. to credit or charge the Company indicated below. Both parties agree that the initiation of ACH transactions to the listed account(s) must comply with provisions of U.S. law and NACHA (National Automated Clearinghouse Association) Operating Rules.

This Agreement provides authorization for business to business individual ACH transactions to be initiated by SIPAHİ HUNTING AND TACTICAL INC. when authorized using the methods designated below. This Agreement will remain in effect until Company cancels it in writing. Both parties agree that this Agreement in conjunction with any of the designated methods constitutes authorization to debit Company's business bank account(s), and Company agrees not to dispute any debits with its bank provided the transaction(s) correspond to the terms indicated in this Agreement.

Please complete the information below & include copy of voided check on page 2:

I ..... authorize SIPAHİ HUNTING AND TACTICAL INC. to charge my bank account indicated below for invoices due for placed orders as well as any necessary payment adjustments for any transactions credited/debited in error.

Billing Address	Phone#
City, State, Zip	Email

Account Type	<input type="checkbox"/> Business Checking	<input type="checkbox"/> Business Savings	<input type="checkbox"/> Personal Checking	<input type="checkbox"/> Personal Savings
Name on Acct				
Bank Name				
Bank Routing #				
Account Number				
Bank City/State				

Individual Transaction Authorization Methods (check all that apply)

<input type="checkbox"/> Text	<input type="checkbox"/> Email	<input type="checkbox"/> Written	<input type="checkbox"/> www.sipahiusa.com
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I authorize SIPAHİ HUNTING AND TACTICAL INC. to initiate ACH Debits and Credits to the bank account indicated above, provided each transaction is initiated according to the terms of this Agreement.

Signature	Date
Name	Title

Mail Adress: 5511 Atlantic blvd. Jacksonville, FL 32207  
 Werehouse : 1612 E 8th St. suite #B Jacksonville, FL 32206  
 www.sipahiusa.com - www.sipahiarms.com

+1 609 481 71 02 cell phone and Text order  
 info@sipahiusa.com - sipahiinc@gmail.com

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# SIPAHI HUNTING AND TACTICAL INC.

I certify that I am an authorized representative of the Company indicated above and that I have the authority to enter into this Agreement on the Company's behalf. Company agrees to notify SIPAHI HUNTING AND TACTICAL INC. in writing at least 15 days in advance of any changes in its account information. Company understands that because these are electronic transactions, these funds may be withdrawn from its account as soon as the date an individual transaction is authorized, and that it will have limited time to report and dispute errors.

In the case of an ACH Transaction being rejected for Non-Sufficient Funds (NSF), Company understands that SIPAHI HUNTING AND TACTICAL INC. may attempt to process the charge again within 30 days and agrees to an additional \$25 charge for each instance an NSF is returned (\$50 for 2 NSF's on one check). In the case of a NSF ACH, the charge will be re-run as an ACH or on a credit card the Company has used for payment on a previous order.

INITIAL HERE

## COPY OF VOIDED CHECK

SIPAHI HUNTING AND TACTICAL INC. requires that you also provide a copy or scan of a voided check for the account that you wish to pay with ACH from. Our team uses this voided check for an additional verification step before we process the ACH transaction.

The best way to provide a voided check is to write "VOID" on the check, tape it to the area indicated below, then scan the page to your computer.

Alternatively, you can submit the voided check as separate scanned image attached to the same email as this completed form.

If you do not have access to a scanner you may mail this completed form with copy of voided check to our address.

**IMPORTANT:** Please make sure that below voided check matches bank routing number & account number information that was provided on page 1.

ATTACH VOIDED CHECK HERE

Shipment will be held up to five days pending approval on ACH or company checks.

There will be a \$30.00 service charge for returned checks.

There will be a \$25.00 service charge for ACH payments that chargeback due to Insufficient Funds.

All credit or debit card payment will be apply %3 processing fee

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**PLEASE SUBMIT THIS COMPLETED FORM USING ANY OF THE AVAILABLE OPTIONS BELOW:**

**Email:** (sen to both please)

**Please email to: [info@sipahiusa.com](mailto:info@sipahiusa.com) with FFL copy**