

U.S. Department of Agriculture  
Rural Development - St. Louis, Missouri  
Customer Initiated Payments (CIP) Enrollment Form

Please process my request pertaining to the Customer Initiated Payments (CIP) program which uses the Automated Clearing House (ACH) to pay my Rural Development loan. I understand that the CIP/ACH payments will only be made after my organization schedules the payment on the CIP system.

Current Date: \_\_\_\_\_ Effective Date of Action: \_\_\_\_\_

Action Requested:  Add  Change  Delete

=====

**BORROWER INFORMATION**

Reference No. / Primary Borrower ID:	_____
Borrower Name:	_____
Address:	_____
City/State/Zip:	_____
Contact Person/Title:	_____ (Please Print)
Signature of Contact:	_____ (Signature Only)
Telephone No.:	(____) _____
Fax No.:	(____) _____

**BANKING INFORMATION**

	Old Banking Information	New Banking Information
Bank Routing Transit No.:	_____	_____
Bank Account No.:	_____	_____
Bank Acct Type:	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> General Ledger	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> General Ledger
Bank Account Nickname:	_____	_____

If adding or changing routing transit number or bank account, please send a VOIDED check or deposit slip.

Fax this completed form and attachments to:

or

Mail this completed form with attachments to:

USDA/Rural Development  
Cash Management Branch  
314-457-4370

USDA Rural Development  
ATTN: Cash Management Branch  
Bldg 104/FC-363  
4300 Goodfellow Blvd.  
St. Louis, MO 63120

*According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0575-0184. The time required to complete this information collection is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.*

**Privacy Act Statement**

*The following information is provided to comply with the Privacy Act of 1974 (P.L. 93-579). The information requested on the form is required under various provisions of title 15 U.S.C. 1601, 12 CFR 205 and 31 CFR 202, for the purpose of providing the authority to the Department of Treasury to designate financial institutions to collect payments, by electronic means, from your account. The information will be used for identification with the records of the government agency and the financial institution to direct your payments to the point you authorize.*