



ACH RECURRING PAYMENT AUTHORIZATION FORM

Please read carefully. By completing the information below and your monthly lease payment will be automatically withdrawn from the account you designate. The payment will be withdrawn on the scheduled due date each month. When that date falls on a weekend or bank holiday, the payment will be withdrawn on the next business day but your lease account will be credited with the payment on the scheduled due date. If you live in a jurisdiction that bills additional taxes periodically, we will collect additional amounts owed through your ACH debit.

Lessee Name(s)		
Last 6 Digits of VIN		Phone Number
Email Address		

ABA Routing Number		Account Number	
Account Type	<input type="checkbox"/> Checking <input type="checkbox"/> Savings	FOR Routing Number	Account Number
Bank Name			
Bank City, State			
Names(s) on Account			
Signature(s)			

By signing above, I/we authorize Tesla Finance LLC, including its subsidiaries and affiliates ("Tesla Finance") to initiate withdrawals from the checking account or savings account shown above, for amounts due to Tesla Finance according to the terms of my Lease Agreement. I may cancel this authorization by contacting Tesla Finance by phone at 844- TESLA85 (844-837-5285) or by email at teslafinance@tesla.com.

[Please attach a voided check for the above account here.]

<input type="checkbox"/> I do not have a voided check and have reviewed the accuracy of the account number and routing number.

_____ INITIALS

*Please complete this form, attach a voided check for the above account or indicate you do not have voided checks. This form may be scanned and emailed to teslafinance@tesla.com.

AN INCOMPLETE ACH FORM WILL VOID YOUR ENROLLMENT