

PETITION FOR EXCEPTION TO RETURNED CHECK SERVICE CHARGE FEE

(PLEASE USE BLUE OR BLACK INK)

Read the instructions on this form.

Petitions cannot be considered for exception 15 days after the check was received by UVU.

Return completed form with any supporting documentation to the Collections Office BA-012 or by fax at 801.863.6831.

Name: _____ UVU ID: _____ Date: _____

Address: _____ City/State/Zip: _____

Check Amount: \$ _____ Check # _____ Written For: _____

Fully explain your reason and justification for this petition. If additional space is needed you may use the reverse side of this form. Attach any supporting documentation to your claim.

Utah Valley University return check procedures are in compliance with **Utah Code 7-15-1**. In accordance with **7-15-1, Utah Code Annotated**, an issuer of a check (payment instrument) is liable to the holder of the check if the check is not honored at the time it is presented; and is marked "refer to maker"; the account upon which the check is made or drawn: does not exist; has been closed; or does not have sufficient funds or sufficient credit for payment in full of the check; or the check is issued in partial or complete fulfillment of a valid and legally binding obligation; and the issuer stops payment on the check with the intent to: fraudulently defeat a possessory lien; or otherwise defraud the holder of the check. **The issuer of the check is liable for the check amount and a service charge of \$20.**

Exceptions to the return check service charge are considered if the check was returned in error by the bank or credit union. This must be documented by the financial institution on official letterhead. If this return check was on an online check payment, I am aware that I agreed to the online terms. I understand that if this petition is approved, it is a one-time only approval. Submission of the petition form does not guarantee approval of by the committee.

My signature on the line below acknowledges that I have read and fully understand the above guidelines and request an exception to the return check policy. I also affirm, to the best of my knowledge, that the statements I provided are true.

Signature of Student: _____ Date: _____

For Committee Use Only:

Approved

Denied

Committee Representative: _____