

ACH Automatic Bank Draft Authorization Agreement

AUTHORIZATION AGREEMENT FOR DIRECT PAYMENTS (ACH DEBITS)

Accounts will be debited on the 15th of each month for Water/Sewer Customers and the 20th for Sewer only customers. If the date of debit falls on a weekend or holiday, the account will be debited the following business day.

I (we) hereby authorize the TOWN OF CEREDO to initiate debit entries of accounts current balances to my (our) Checking Account/Savings Account indicated below at the depository financial institution named below, hereinafter called DEPOSITORY, and to debit the same to such account. I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of U.S. law and the TOWN OF CEREDO's Automatic Bank Draft Service Policy.

Depository Institution

Bank Name												Che	ckin	ıg		Sav	ings
Routing No.																	
Checking No.]		
		*Pleas	e inclu	ıde A	LL lea	ading	zerc	os in	your	ban	k acc	oun	t nu	mber	-		
Town of Cere	do Accoι	int Inf	format	tion													
Utility Account Number 1				1	0						Account: 100123 Location: 09-0001 Customer: CEREE Service At: 700 B				01-07 REDO TOW	07 DO TOWN HALL	
Property Location Address:																	
Maximum ACH withdrawal amount:					Fu	Full Balance				\$150		ç	\$300		\$50	0	

This authorization is to remain in full force and effect until the Town of Ceredo has received written or electronic notification from me (or either of us) of its termination in such time and in such manner as to afford the Town of Ceredo and DEPOSITORY a reasonable opportunity to act on it.

Name on Bank Acct:	Date:
Signature:	Email:
Cell Phone:	Work:
Mailing Address:	