Debit Authorization Form

I authorize STEPHENS COUNTY RWS & SWM #3 to charge my bank account shown below for the amount of my monthly utility bill. PAYMENT WILL OCCUR ON THE 15TH OF EACH MONTH. If the 15th falls on a weekend or holiday, payment will occur on the following weekday. I will notify Stephens County RWS & SWM #3 in writing if I decide to cancel this agreement. Stephens County RWS & SWM # 3 also has the right to terminate this agreement.

Utility Account Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print name as it appears on your utility bill \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print name as it appears on your bank account \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Financial Institution Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Checking Account Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ABA Routing Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Authorized Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I (we) authorize Stephens County RWS & SWM #3, hereinafter called Company, to initiate debit entries and to initiate, if necessary, credit entries and adjustments for any debit entry in error to my (our) account indicated below, and to debit and/or credit the same to such account. This authority is to remain in full force and effect until Company has received written notification from me (or either of us) of its termination in such manner as to afford Company and Financial Institution below a reasonable opportunity to act on it.

You must attach a voided check or a letter from your bank stating your checking account number and routing number.