

Authorization Agreement for Automated Payments (ACH Debits)

Company

Name: HECETA WATER PUD

Customer

Account No. _____

I/we hereby authorize Heceta Water District (COMPANY), to initiate ACH debit entries to

My/our Checking Savings (select one) indicated below, and authorize the financial institution named below ("BANK"), to debit same to such account

Bank Information

Bank Name _____ Branch _____

Routing/ABA No. _____ Account No _____

PLEASE ATTACH VOIDED CHECK

This authority is to remain in full force and effect until COMPANY and BANK have received written notification from me (or either of us) of its termination in such time and in such manner as to afford COMPANY and BANK a reasonable opportunity to act on it.

Name (please print)

Name (please print)

Service Address

Service Address

Signature

Signature

Date

Date