

Authorization Agreement for Automated Payments (Debit/Credit Card)

Company
Name: **HECETA WATER PUD**

Customer
Account No. _____

I/we hereby authorize Heceta Water PUD (COMPANY), to initiate debit entries to my/our debit/credit card indicated below, and authorize COMPANY's merchant service provider (ELAVON) to debit same to such account.

Card Information

Card Type _____

Card Number _____

CVC No. _____

Expiration Date _____

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

Name (please print)

Name (please print)

Service Address

Service Address

Signature

Signature

Date

Date

Phone number