

Authorization Agreement for Automated Payments (ACH Debits)

Company Name: **HECETA WATER PUD**

Customer Account No. _____

I/we hereby authorize Heceta Water PUD (COMPANY), to initiate ACH debit entries to my/our checking account indicated below, and authorized 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/or 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

Phone Number

Phone Number