

CITY OF MIDWAY

WATER BILLING

AUTHORIZATION AGREEMENT FOR PREAUTHORIZED PAYMENTS

Business or
Name _____ Water Service Acct# _____

I (We) hereby authorize *Midway Water, Sewer, Garbage* hereinafter called COMPANY, to initiate debit entries to my (our) Checking Savings account (select one) indicated below and the depository named below, hereinafter called DEPOSITORY, to debit the same to such account.

DEPOSITORY NAME _____ BRANCH _____

CITY _____ STATE _____ ZIP CODE _____

TRANSIT/ABA# _____ ACCOUNT# _____

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

NAME(S) _____ ID# _____

DATE _____ SIGNED _____