

AUTHORIZATION AGREEMENT FOR AUTOMATIC DEBIT (ACH Debit)

I hereby authorize **VILLAGE OF PEPIN** to initiate debit entries to my account indicated below and the financial institution named below to debit the same to account. I acknowledge that the origination of ACH transactions to my account must comply with the provisions of the United States law. (Please attach a voided check or deposit ticket).

Bank Name: _____

Bank Address: _____

Bank Telephone Number: _____

Bank Routing Number: _____

Bank Account Number: _____ Acct Type: ___Checking ___Savings

I agree that my bank account will be debited on the bill due date. This authorization is to remain in effect until **Village of Pepin** has received written notification from me of its termination in such time and in such manner as to afford **Village of Pepin** and the resident's bank a reasonable opportunity to act on it.

Please initial what type of direct payment customer is initiating:

_____ Direct Payment (Single Transaction on or before due date)

_____ Fixed Amount/Direct Payment – (Monthly transaction) - This amount will be taken from account ***no matter what the balance is.***

Name (s) Printed: _____

Signed: _____

Date: _____ Utility Account Number: _____

Property Address: _____

Phone Number: _____