AUTHORIZATION AGREEMENT FOR ORIGINATION OF ACH ENTRIES (ACH CREDITS OR DEBITS)

COMPANY NAME: _____CICWA_____

I(we) hereby authorize_____, hereinafter called COMPANY, to initiate automated clearinghouse entries to my(our) Checking Savings account(select one) indicated below and the depository named below, herein called DEPOSITORY, to credit and/or debit the same to such account for payment of water and/or refuse bills.

DEPOSITORY NAME_____
BRANCH_____
CITY_____STATE_____ZIP_____
TRANSIT/ABA NO._____
ACCOUNT NUMBER_____

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

NAME(S): _____ NAME(S): _____
(PLEASE PRINT) (PLEASE PRINT)

ADDRESS:_____

_____

PHONE _____

DATE: _____

SIGNED: X_____

SIGNED: X_____