

TOWN OF DILLON
WATER AND SEWER PAYMENTS
AUTHORIZATION AGREEMENT FOR AUTOMATED DEPOSITS
(ACH CREDITS)

Company Name: Town of Dillon

Company ID Number: 840526980

I (we) hereby authorize the Town of Dillon, hereinafter called 'Company', to initiate credit entries and to initiate, if necessary, debit entries and adjustments for any credit entries in error to my (our) ___Checking ___Savings account (select one) indicated below and the depository named below, hereinafter called 'Depository', to credit and/or debit the same to such account.

Depository Name _____ Branch _____

City _____ State _____ Zip _____

Transit/ABA No. _____ Account No. _____

This authority is to remain in full force and effective until Company 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) _____

Water and Sewer Account Number _____

Signature _____ Date _____