

AUTHORIZATION AGREEMENT FOR AUTOMATIC DRAFTS

CUSTOMER NAME \_\_\_\_\_  
SERVICE ADDRESS \_\_\_\_\_  
ACCOUNT NUMBER \_\_\_\_\_  
PHONE NUMBER \_\_\_\_\_

I (we) hereby authorize Edgefield County Water & Sewer Authority to initiate any 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 bank named below, to credit and/or debit the same to such account.

BANK NAME \_\_\_\_\_  
BRANCH LOCATION \_\_\_\_\_  
CITY \_\_\_\_\_STATE \_\_\_\_\_ZIP \_\_\_\_\_  
BANK ACCOUNT NUMBER \_\_\_\_\_  
ROUTING NUMBER \_\_\_\_\_  
NAMES (S) LISTED ON BANK ACCOUNT \_\_\_\_\_

This authority is to remain in full force and effect until the Edgefield County Water & Sewer Authority has received written notification from me (us) of its termination in such time and in such manner as to afford Edgefield County Water & Sewer Authority and above mentioned bank a reasonable opportunity to act on it.

NAME (S) \_\_\_\_\_

DATE \_\_\_\_\_ (please print)  
SIGNED X \_\_\_\_\_  
SIGNED X \_\_\_\_\_

\*A pre-notification is required by bank before actual draft is effective.

**\*\*PLEASE ATTACH A VOIDED CHECK\*\***