

W A R D 2
WATER
DISTRICT
Providing Quality Water Today & Tomorrow

NEW BANK DRAFT

CHANGE EXISTING DRAFT

**AUTHORIZATION AGREEMENT FOR
PREAUTHORIZED PAYMENTS
(BANK DRAFTS)**

CUSTOMER NAME: _____ ACCOUNT NUMBER: _____
 LAST FIRST MIDDLE

LOCATION ADDRESS: _____

I (we) hereby authorize WARD 2 WATER DISTRICT, hereinafter called COMPANY, to initiate debit entries to my (our) checking account indicated below and the depository named below, hereinafter called DEPOSITORY, to debit same to such account.

DEPOSITORY (BANK)
NAME _____ BRANCH _____
CITY _____ STATE _____ ZIP _____
TRANSIT / ABA NO. _____ ACCOUNT NO. _____

This authority is to remain in full force and effect 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) _____

DATE _____ SIGNED _____

CLERK _____

(ATTACH VOIDED CHECK HERE)