# AUTHORIZATION AGREEMENT FOR AUTOMATIC BILLING

***FOR THE BILLING DEPARTMENT OF THE REDWATER WATER AND SEWER SYSTEM**

I (we) hereby grant permission to the City of Redwater, Tax ID No. 75-2249623, hereafter referred to as "the Company," to initiate debit entries to the account specified below. The depository financial institution identified herein shall be referred to as "the Depository," which is authorized to debit the specified account accordingly.

Please select one of the options provided below.

Checking Savings

_____

NAME OF FINANCIAL INSTITUTION

_____ _____

ROUTING NUMBER ACCOUNT NUMBER

KINDLY PROVIDE A VOIDED CHECK OR A COPY OF YOUR BANK ACCOUNT CARD FOR THE AFOREMENTIONED ACCOUNT TO ENABLE US TO VERIFY THE NUMBERS YOU HAVE SUPPLIED.

This authority shall remain in full force and effect until COMPANY receives written notification from me or either party regarding its termination. Such notification must be provided in a timely manner to allow COMPANY and DEPOSITORY a reasonable opportunity to respond accordingly.

_____ _____

Name(s) on account (Please Print) Account Number

_____ _____

Signature(s) Date