

DEBIT AUTHORIZATION

COMPANY NAME: WEST OVERTON UTILITY DISTRICT

UTILITY ACCOUNT #: _____

I (we) hereby authorize West Overton Utility District, hereinafter called Company, to initiate debit entries to my (our) account indicated below and the financial institution named below, hereinafter called Financial Institution, to debit the same to such account for (Application). I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of U.S. law.

Financial Institution _____ Branch _____

Address _____

City/State/Zip _____

Routing Number _____ Account Number _____

Type of Account: _____ Checking _____ Savings

Amount (or how amount is determined): Charge for Monthly water usage

Frequency (Weekly, Monthly etc.): Monthly Start Date (if recurring): 10th of the month

Date of Debit (s): 10th of the month

If the debit is recurring and the date of the debit falls on a non-banking day, the debit will hit your account on the next banking day and will not hit your account prior to the authorized date.

(Note: For varying amounts the company must send, based on the *NACHA Operating Rules*, written notification of the amount and the date on or after which the transfer will be debited at least ten calendar days in advance of the debit. If the date varies, the *Rules* state that the Originator must send the Receiver notification of new date at least seven calendar days in advance of the debit.)

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 manner as to afford Company and Financial Institution a reasonable opportunity to act on it.

Print or Type Individual Name _____

Signature _____

Date _____