



WATER DEPARTMENT

AUTHORIZATION AGREEMENT FOR PREAUTHORIZED PAYMENTS --(DEBITS)

CUSTOMER NAME(S) _____

I (We) hereby authorize The Town of Gurley Water Department of Gurley, AL, hereinafter called COMPANY, to initiate entries to my (our) checking account indicated below and the BANK named below, hereinafter called the BANK, to debit the same to such account.

BANK NAME _____

BRANCH _____

CITY _____ **STATE** _____ **ZIP** _____

TRANSIT/ROUTING/ABA # _____

ACCOUNT # _____

Please attach a **voided** or **cancelled** check.

This authority is to remain in full force and effect until COMPANY and BANK has received written notification from me (either of us) of its termination in such time and in such manner as to afford COMPANY and BANK a reasonable opportunity to act on it.

The COMPANY will charge an returned item fee of \$25.00 if account is not paid due to insufficient funds in Customer's account.

The date of debit will be the 20th of every month.

I understand that if my withdrawal date falls on a weekend or legal or banking holiday, the COMPANY will initiate the applicable transaction on the next business day. This will not change the date of any subsequent withdrawal date.

Signature: _____ Date: _____

Signature: _____ Date: _____

This form shall be retained, by the COMPANY, for 2 years after termination of request.

Revised 8/22/19