

**AUTHORIZATION AGREEMENT**  
**DEBIT AUTHORIZATION (PPD-Prearranged Payment)**

I (we) authorize **RIVERBEND WATER AND SEWER CO** ("COMPANY") to electronically debit my (our) account (and, if necessary, electronically credit my (our) account to correct erroneous debits as follows:

\_\_\_ Checking Account/ \_\_\_ Savings Account (select one) at the depository financial institution named below ("DEPOSITORY"). I (we) agree that ACH transactions I (we) authorize comply with all applicable law.

Depository Name \_\_\_\_\_

Routing Number \_\_\_\_\_ Account Number \_\_\_\_\_

Amount of debit(s) or method of determining amount of debit(s) [or specify range of acceptable dollar amounts authorized]:

\_\_\_\_\_

Date(s) and/or frequency of debit(s):

\_\_\_\_\_

I (we) understand that this authorization will remain in full force and effect until I (we) notify COMPANY [insert manner of revocation, i.e., in writing, by phone, location, address, etc.] that I (we) wish to revoke this authorization. I (we) understand that COMPANY requires at least [X days/weeks] prior notice in order to cancel this authorization.

Name(s) \_\_\_\_\_

(Please Print)

Date \_\_\_\_\_

Signature(s) \_\_\_\_\_