



Central Water Control & Improvement District

5307 US Hwy 69 N ~ Pollok, Texas 75969 ~ (936) 853-2354 ~ Fax: (936) 853-2355

ACH BANK DRAFT AUTHORIZATION FORM

Customer name: _____ Customer # _____

Address: _____

DEPOSITORY:

Bank Name: _____ Branch: _____

City: _____ State: _____ Zip: _____

Bank Routing Number: _____

Select One:

Checking

Bank Account Number: _____

Savings

I hereby authorized Central WC & ID, hereinafter called COMPANY, to initiate debit entries to my (our) account indicated above at the depository financial institution named above, hereinafter call DEPOSITORY, and to debit the same to such account. I acknowledge that the origination of ACH transactions to my account must comply with the provisions of the United States Law.

This authority is to remain in full force and effect until COMPANY has received written notification from me of its termination. The notification should be in such a timely manner as to notify the bank in a reasonable time to stop any future drafts. Should an automatic debit be returned by the bank, I understand I will be taken off of bank draft and will be charged applicable collection fees by COMPANY.

Deductions will be made on the 9th day of each month. To stop a draft, the termination letter must be received after processing on the 9th day of the month or before the end of the month.

Customer Signature: _____

Date: _____

Phone Number: _____