

RIVER ROAD WATER WORKS, INC.

AUTHORIZATION AGREEMENT FOR (ACH) AUTOMATIC PAYMENTS

"We are an Equal Opportunity Provider"

CUSTOMER INFORMATION

NAME (PLEASE PRINT):	
ACCOUNT NUMBER:	PHONE/CELL #
SERVICE ADDRESS:	
CITY/STATE/ZIP:	
EMAIL ADDRESS:	
DRIVERS LICENSE #:	

FINANCIAL INSTITUTION INFORMATION

FINANCIAL INSTITUTION NAME:									
STREET ADDRESS:									
CITY/STATE/ZIP:									
NINE DIGIT BANK ROUTING NUMBER:									
BANK ACCOUNT NUMBER:									
ACCOUNT TYPE:	<input type="checkbox"/> CHECKING	<input type="checkbox"/> SAVINGS							

AUTHORIZATION

I hereby authorize River Road Water Works, Inc. to initiate debit entries from my account at the financial institution named above for water charges and to initiate, if necessary, credit entries and adjustments for any entries made in error to my account indicated above. This authorization will remain in effect until I have notified River Road Water Works, Inc., in writing, of such request for change or cancellation.

SIGNATURE	DATE
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---ATTACH VOIDED CHECK HERE---

FOR OFFICIAL USE ONLY:

Revoked by: \_\_\_\_\_ on \_\_\_\_\_ Cancelled by: \_\_\_\_\_ (Attach written request)  
(Customer Name) (Date) (Office Personnel)