

AUTHORIZATION AGREEMENT FOR PREAUTHORIZED PAYMENTS

I (We) hereby authorize the Village of Shawnee Hills, hereinafter called COMPANY, to initiate debit entries to my (our) account indicated below and the depository named below, hereinafter called FINANCIAL INSTITUTION, to debit the same to such account for Sanitary Sewer payments. I (We) acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of U. S. Law.

Financial Institution Name _____

Routing # _____

Account # _____

Type of Account: _____ Checking _____ Savings

Start Date _____ End date _____

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 in such manner as to afford COMPANY and FINANCIAL INSTITUTION a reasonable opportunity to act on it.

Signature: _____ Date: _____

Print Name: _____

Signature: _____ Date: _____

Print Name: _____

PLEASE ATTACH COPY OF VOIDED CHECK TO THIS FORM