

Village of Utica

AUTHORIZATION AGREEMENT FOR BANK DRAFTS (ACH DEBITS)

I (we) hereby authorize Village of Utica to initiate a debit/credit entry to my (our) Checking Account or Savings Account (select one) indicated below at the depository financial institution named below, hereinafter called DEPOSITORY, and to debit the same to such account. I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of U.S. law. Draft due date is the “#” of the month or the next business day.

Bank Name: _____

Address of property this ACH is for: _____

Bank Routing #: _____

Bank Account #: _____

This authorization is to remain in full force and effect until “Utility Name” has received verbal or written notification. **Customer must give Village of Utica a 15 day notice for changes or termination.**

Name(s): _____ Acct #: _____
(Please Print) (Utility Account Number)

Phone # (home/Cell): _____ Phone # (work): _____

Date: _____ Signature: _____

Date: _____ Signature: _____

NOTE: DEBIT AUTHORIZATIONS MUST PROVIDE THAT THE RECEIVER MAY REVOKE THE AUTHORIZATION ONLY BY NOTIFYING THE ORGINATOR IN THE MANNER SPECIFIED IN THE AUTHORIZATION.

PLEASE INCLUDE A VOIDED CHECK