

CITY ACCOUNT # _____

DEBIT AUTHORIZATION

I (we) hereby authorize, HARRAH PUBLIC WORKS AUTHORITY, hereinafter called HPWA, to initiate debit entries for UTILITY BILL **on but not prior to the 10th of every month**, to my (our) account indicated below and the financial institution named below, hereinafter called FINANCIAL INSTITUTION, to credit 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.

(Financial Institution Name)

(Branch)

(Address)

(City/State)

(Zip)

(Phone Number)

Type of Account: _____ Checking

(Routing Number)

(Account Number)

This authority is to remain in full force and effect until HPWA has received written notification from me (or either of us) of its termination in such time and manner as to afford HPWA and FINANCIAL INSTITUTION a reasonable opportunity to act on it.

(Print Individual Name)

(Signature)

(Print Individual SS# Number)

(Date)

PLEASE ATTACH COPY OF VOIDED CHECK OR DEPOSIT SLIP TO THIS FORM!

Received by Harrah Public Works Authority Representative:

By Whom: _____ **Date:** _____