

CITY ACCOUNT # _____

DEBIT AUTHORIZATION

I (we) have provided our financial institution information and 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.

(Account Address)

(Print Individual Name) (Signature)

(Print Individual SS# Number) (Date)

By signing, you are acknowledging that you have provided accurate and correct financial institution information for the account

Received by Harrah Public Works Authority Representative:

By Whom: _____ Date: _____
Email completed form to utilityclerk@cityofharrah.com