

AUTHORIZATION FOR DEBIT ENTRY

I (we) hereby authorize the City of Fairbury, hereinafter called COMPANY, to initiate debit entries to my (our) account indicated below and the financial institution named below, hereinafter called FINANCIAL INSTITUTION, to debit the same to such account monthly for water & sewer bill. The debit entries will be initiated ___ Monthly_____ (frequency) to commence on _____. 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, if applicable)

(Address) (City/State) (Zip)

(Financial Institution Routing Number) (Account Number)

Type of Account: Checking _____ Savings _____

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

(Print Individual Name) (Signature)

(Print Individual Name) (Signature)

(City of Fairbury representative) (Date)

PLEASE ATTACH COPY OF VOIDED CHECK TO THIS FORM,
or print address below
