Automatic Checking/Savings Payment Authorization

I hereby authorize TOWN OF WANATAH to initiate debit entries to my account for my utility account indicated below and the financial institution named below. The account will be charged the amount indicated on the Wanatah Utility Bill. Utility payments will be debited the $10^{\rm th}$ of each month for the bills mailed the $1^{\rm st}$ of each month. If the $10^{\rm th}$ falls on the weekend or holiday, the payment will be deducted the next business day. FORM MUST BE RECEIVED BY THE $27^{\rm TH}$ OF EACH MONTH.

Account Number:			
Customer Name:			
Service Address:			
Phone Number:			
Bank Name :			
Account number:			
Account type:	Checking	Savings	
received written notifias to afford TOWN O	ication from me of its DF WANATAH and fing ge the origination of A	effect until TOWN OF WANA termination in such time and in nancial institution a reasonable ACH transactions to my account	such manner opportunity to
Signature_ (Utility Cust	tomer)	Date	
Signature(Bank Accor	unt Holder if different	Date: t than customer)	
Received form		ONLY BELOW: Input into system:	