



Authorization Agreement for Pre-arranged Payments

PLEASE PRINT OR TYPE

Greenwood utilities account no.

Checking account no.

Name of bank and branch, if any

Street address of bank

City

State

Zip

Bank transit number

Name as shown on bank records

I hereby authorize Greenwood Utilities to initiate debit entries or drafts to my checking account indicated above, and the bank named above to debit to that account.

In granting authority to Greenwood Utilities to sign my name to checks, I assume all responsibility for any improper use of that authority

Date: ____/____/____ Signed: _____

CUSTOMER SIGNATURE (AS ACCEPTED BY BANK)

This authority is to remain in full force and effect until Greenwood Utilities and Bank have received written notification from me of its termination in such time and in such manner as to afford Greenwood Utilities and Bank a reasonable opportunity to act on it.

Please make sure to include a voided check or a copy of a voided check along with the application.