



P.O. Box 2119
745 Jim Pickens Road
Sulphur, Louisiana 70663
PH. 337-528-3446 ~ Fax 337-527-7044

AUTHORIZATION AGREEMENT FOR PREAUTHORIZED PAYMENTS

I (we) hereby authorize Houston River Water Works District #11, hereinafter called COMPANY, to initiate debit/credit entries to my (our) checking account indicated below at the depository named below, hereinafter called DEPOSITORY, to debit/credit the same to such account.

Depository (Bank Name) : _____

City: _____ State: _____ Zip: _____

Routing Number: _____

Account Number: _____

This authorization 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 in such manner as to afford COMPANY and DEPOSITORY a reasonable opportunity to act on it.

Name(s): _____

Phone Number: _____

Account Number: _____

Date: _____

Signed: _____

NOTE: ALL WRITTEN DEBIT AUTHORIZATIONS MUST PROVIDE THAT THE RECEIVED MAY REVOKE THE AUTHORIZATION ONLY BY NOTIFYING THE ORIGINATOR IN THE MANNER SPECIFIED IN THE AUTHORIZATION

ATTACH VOIDED CHECK HERE