



NEVER WORRY ABOUT
LATE PAYMENTS
AGAIN!

DIRECT PAYMENTS (ACH DEBITS)

AUTHORIZATION AGREEMENT

I (we) hereby authorize EJ WATER COOPERATIVE to initiate debit entries to my (our) indicated below at the depository financial institution named below, hereafter call DEPOSITORY, and to debit 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.

MEMBER INFORMATION

BANK NAME: _____

ROUTING NUMBER: _____ **ACCOUNT NUMBER:** _____

ACCOUNT TYPE:

☐ CHECKING

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 (PLEASE PRINT)

SIGNATURE

NAME (PLEASE PRINT)

SIGNATURE

SERVICE ADDRESS: _____ **DATE:** _____

UPDATED CONTACT INFORMATION

PRIMARY PHONE: _____ **SECONDARY PHONE:** _____

☐ LANDLINE ☐ CELL CARRIER _____ ☐ LANDLINE ☐ CELL CARRIER _____

In the future would you like to be notified by text of billing, outages, updates, etc.? ☐ YES ☐ NO

In an effort to **GO GREEN**, we will be sending you an E-bill, if you would like a printed bill, check here. ☐

EMAIL: _____

FOR OFFICE USE ONLY:

Account Number: _____ Location ID: _____