



ACH AUTHORIZATION FORM

AUTHORIZATION AGREEMENT – FOR PRE-ARRANGED PAYMENTS (ACH DEBITS)		
COMPANY NAME: <p style="text-align: center; margin: 0;">VILLAGE OF WINNEBAGO</p>		
I (we) hereby authorize: VILLAGE OF WINNEBAGO		
<p>Hereinafter called VILLAGE, to initiate debit entries to my (our) Checking or Savings account indicated below and the depository named below, hereinafter called DEPOSITORY, to debit the same to such account.</p> <p>NOTE: The dollar amount showing due on the current VILLAGE utility bill will be drawn from the account indicated below on the closest business day to the fifteenth of the month according to the terms of said bill.</p>		
DEPOSITORY NAME & ADDRESS	TRANSIT/ABA NUMBER	
CHECKING <input type="checkbox"/> SAVINGS <input type="checkbox"/>	ACCOUNT NUMBER	
<p>This authorization is to remain in full force and effect until VILLAGE and DEPOSITORY have received written notification from me (or either of us) of its termination in such time and in such manner as to afford VILLAGE and DEPOSITORY reasonable opportunity to act on it. I (or either of us) have the right to stop payment of a debit entry by notification to DEPOSITORY at such time as to afford DEPOSITORY a reasonable opportunity to act on it prior to charging account. After account has been charged, I (or either of us) have the right to have the amount of an erroneous debit immediately credited to my (our) account by DEPOSITORY, provided I (we) send written notice of such debit entry in error to DEPOSITORY within 15 days following issuance of the account statement or 45 days after posting, whichever occurs first.</p>		
<p style="background-color: yellow; margin: 0;">Please attach a voided check for account verification purposes.</p>	VILLAGE UTILITY #	DATE
NAME (PLEASE PRINT)	NAME (PLEASE PRINT)	
SIGNATURE	SIGNATURE	