

AUTHORIZATION AGREEMENT FOR AUTOMATIC PAYMENTS

I (We) hereby authorize MOOREVILLE RICHMOND WATER ASSN. to initiate debit entries to my (our)

() Checking (Savings) (Select one)

Account indicated below and the depository financial institution named below, to debit the same to such account.

FINANCIAL INSTITUTION NAME CITY STATE ZIP CODE

ROUTING NUMBER

ACCOUNT NUMBER

This authority is to remain in full force and effect until Mooreville Richmond Water has received notification from me (or either of us) of its termination in such time and in such manner as to allow MRWA and Depository a reasonable opportunity to act on it.

NAME(S) ON ACCOUNT (PLEASE PRINT)

CUSTOMER I.D. NUMBER

DATE

SIGNATURE

SIGNATURE