



# City of Huntington Water Department

## AUTHORIZATION AGREEMENT FOR PREAUTHORIZED PAYMENTS

Consumer Name (s): \_\_\_\_\_  
(Please Print)

I (we) hereby authorize Board of Public Works (Huntington City Utilities), hereinafter called COMPANY, to initiate debit entries to my (our) Checking account indicated below and the depository named below, hereinafter called DEPOSITORY, to debit the same to such account.

Depository (Bank) Name: \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Transit/Routing Number: \_\_\_\_\_

Account Number: \_\_\_\_\_

This authority is to remain in full force and effective until COMPANY and DEPOSITORY 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.

Consumer Name(s): \_\_\_\_\_ Phone Number: \_\_\_\_\_  
(Please Print)

Date: \_\_\_\_\_ Water Billing Account Info: Book # \_\_\_\_\_ Account # \_\_\_\_\_

SIGNATURE X \_\_\_\_\_ SIGNATURE X \_\_\_\_\_

\*\* PLEASE include a voided check with this form. Return to the Water Billing Office at 300 Cherry St or mail to City Utilities, P.O. Box 5177, Huntington, IN 46750.

