

Office Use Only:  
Account #

**ALL BANK DRAFT PAYMENTS WILL BE  
DEDUCTED FROM BANK ACCOUNTS ON THE 8<sup>TH</sup>  
OF EVERY MONTH**  
[contracts@gladevilleutility.com](mailto:contracts@gladevilleutility.com)

**AUTHORIZATION AGREEMENT FOR DIRECT PAYMENTS (ACH DEBITS)**

**COMPANY NAME GLADEVILLE UTILITY DISTRICT**

**COMPANY ID NUMBER 620844251**

*I(We) hereby authorize Gladeville Utility District, hereinafter called COMPANY, to initiate debit entries to my (our) account indicated below, at the bank named below, hereinafter called Depository Financial Institution (DFI).*

*This authorization is to remain in full force and effect until the COMPANY has received notification from me (or either of us) of its termination in such time and in such a manner as to afford COMPANY and DFI a reasonable opportunity to act on it. By signing this document, I certify all information provided is correct and cannot hold Gladeville Utility district liable for any charges that may incur from such error.*

**DFI (Bank)** \_\_\_\_\_

**Routing Number (ABA)** \_\_\_\_\_ **Account No.** \_\_\_\_\_

**Name:** \_\_\_\_\_

**Utility Billing Address:** \_\_\_\_\_

**Customer Phone #** \_\_\_\_\_ **Email** \_\_\_\_\_

**Signed** \_\_\_\_\_ **Date** \_\_\_\_\_

**\*\*\*IF AVAILABLE PLEASE ATTACH A VOIDED CHECK\*\*\***

**Note: All written credit authorizations should provide that the receiver may revoke the authorization only by notifying the originator in the manner specified in the authorization.**