



Acct # _____ - _____ - _____

Authorization Agreement for Preauthorized Electronic Withdrawals

I hereby authorize **the Town of Buena Vista** to initiate debit entries to my Checking/Savings account indicated below at the depository (Bank or Credit Union) named below, to debit the same to such account for the purpose of paying the monthly **water bill** to the Town of Buena Vista. Said credit to occur each month between the 18th and 21st of each month.

Beginning date _____

Water Service Account Number: _____ Service Address: _____

BANK NAME _____

CITY _____ STATE _____

ROUTING NUMBER _____

ACCOUNT NUMBER _____

ACCOUNT TYPE (Checking or Savings) _____

I understand that if an erroneous debit is made to my account **the Town of Buena Vista** and the financial institution are authorized to reverse the entry and make any adjustments necessary to my account to correct the erroneous entry. This authorization is to remain in full force and effect until I provide written notice to cease to the **Town of Buena Vista** in such time and in such manner as to afford **the Town of Buena Vista** and the depository (Bank or Credit union) institution reasonable opportunity to act on it.

NAME (Please Print) _____

SIGNATURE _____ DATE _____

EMAIL _____ PHONE # _____

Return this form to Town Hall, 210 East Main St., PO Box 2002 Buena Vista, CO 81211. Call 719-581-1018 or 719-395-8643 Ext. 1018 for questions.

(Please attach a voided check to this agreement)

If you do not have checks for the account you want to use, or if your checks do not have the account holder's name printed on the checks, please attach something that shows the account is yours - a bank statement that shows the names on the account and the entire account number, a letter from the bank, etc...

Date Entered: _____

Date Removed: _____