

NORTHEAST PUBLIC SEWER DISTRICT
1041 Gravois Road
Fenton, Missouri 63026
(636) 343-5090 FAX (636) 343-7904

AUTHORIZATION AGREEMENT FOR DIRECT DEBITS (ACH DEBITS)

I (we) hereby authorize Northeast Public Sewer District, hereinafter called DISTRICT, to initiate debit Entries and to initiate, if necessary, credit Entries and adjustments for any debit Entries in error, to my/our Checking/Savings account indicated below and further authorize the depository named below, hereinafter called DEPOSITORY, to debit and/or credit the same to such account.

DEPOSITORY NAME _____ BRANCH _____

CITY _____ STATE _____ ZIP _____

ACCOUNT# _____ CHECKING _____ SAVINGS _____

This authority is to remain in full force and effect until DISTRICT has received written notification from me (or either of us) of its termination in such time and in such manner as to afford DISTRICT and DEPOSITORY a reasonable opportunity to act on it.

NAME(S) _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

NORTHEAST PUBLIC SEWER BILLING ACCOUNT # _____

SIGNEDx _____ DATE _____

****A voided check or deposit slip from the above referenced checking and/or savings account must be submitted with this agreement.**

***Upon notice of the second automatic debit that is determined to be "insufficient funds" you will forfeit your right to this payment option.**