

## Draft Authorization Form

I hereby authorize **Montgomery County Water System**, hereinafter called the COMPANY, to initiate debit entries and to initiate, if necessary, credit entries and adjustments for any debit entry in error to my (our) account indicated below and the Financial Institution named below, hereinafter called DEPOSITORY, to debit and/or credit the same to such account. This authority is to remain in full force and effect until the COMPANY has received written notification from me (or either of us) of its termination in such time and in such manner as to afford the COMPANY and DEPOSITORY a reasonable opportunity to act on it.

Customer(s) Account Number: \_\_\_\_\_

Customer(s) Name: \_\_\_\_\_

Customer(s) Address: \_\_\_\_\_  
\_\_\_\_\_

***Important: Please check one of the following:***

Checking

Savings

Account # to be drafted: \_\_\_\_\_ Bank Name: \_\_\_\_\_

Bank Routing #: \_\_\_\_\_ Bank Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Draft start date: \_\_\_\_\_

\_\_\_\_\_  
Customers Signature

\_\_\_\_\_  
Date

**Attach voided check here**