



Charles Town Utility Board

AUTHORIZATION AGREEMENT FOR PREAUTHORIZED ACH DEBITS

I hereby authorize Charles Town Utility Board, hereinafter called COMPANY, to initiate debit entries and to initiate, if necessary, credit entries and adjustments for any debit entries in error to my Checking/Savings account indicated below and, in the depository, named below, hereinafter called DEPOSITORY, to debit and/or credit the same to such account. The initial ACH does not include balances owed prior to the date listed below. Please make arrangements with staff to pay the balance owed as of the date of this form. Monthly balances will be debited on the 15th of each month.

Routing No.: _____

Account No.: _____

Type of Account: Checking Savings

This authority is to remain in full force and effect until COMPANY and DEPOSITORY have received written notification from me of its termination in such time and in such manner as to afford COMPANY and DEPOSITORY a reasonable opportunity to act on it.

Name _____ Date _____

Service address _____

Phone Number _____

Signature: _____

Please complete and return to: Charles Town Utilities
P O Box 359
Charles Town, WV 25414

Or drop off at 661 S George St, Charles Town.