

Madison Suburban Utility District

AUTHORIZATION AGREEMENT FOR AUTOMATED PAYMENTS

COMPANY
NAME _____ **COMPANY**
ID NUMBER _____ 62-0920368

I (we) hereby authorize Madison Suburban Utility District, hereinafter called the COMPANY, to initiate debt entries to my (our) checking / savings account (select one) indicated below and the depository named below, hereinafter called DEPOSITORY, to debit same to such account.

DEPOSITORY
NAME _____ **BRANCH** _____
CITY _____ **STATE** _____ **ZIP** _____
TRANSIT/ABA NO _____ **ACCOUNT NO** _____

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

NAME(S) _____ **ID NO** _____

DATE _____ **SIGNED** _____

WATER ACCOUNT NO _____

**Return completed form to: MSUD
P.O. Box 175
Madison, TN 37116-0175**

Include a voided check or voided copy of a check on the bank account which is to be debited

Please note it may take up to two months for bank draft to go into effect and you should continue to pay your bill until receiving a bill that has bank draft printed on it.