839 Fourth Avenue • Lake Odessa, MI 48849 • Phone: (616) 374-3264 • Fax: (616) 374-0040

Lake Odessa

AUTHORIZATION AGREEMENT FOR DIRECT PAYMENTS (ACH DEBITS)

Company Name: LAKEWOOD WASTEWATER AUTHORITY & VILLAGE OF LAKE ODESSA

I (we) hereby authorize LAKEWOOD WASTEWATER AUTHORITY & THE VILLAGE OF LAKE ODESSA, hereinafter called COMPANY, to initiate debit entries to my (our) Checking Account/ Savings Account (select one) indicated below at the depository financial institution named below, hereinafter called DEPOSITORY, and to debit the same to such account. I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of U.S. law.

Depository		
Name	Branch	
City	State	Zip
Routing	Account	
Number	Number	
	n full force and effect until COMPANY has red h time and in such manner as to afford CC	·
Name(s)	Water/Sewer Account #	#
Date	Signature	
Phone		
	IT AUTHORIZATIONS <u>MUST</u> PROVIDE THA	