AUTHORIZATION AGREEMENT FOR DIRECT DEBIT

I hereby authorize the City of Cresco, hereinafter called company, to initiate debit entries to my account indicated below at the depository financial institution named below, hereinafter called Depository, and to debit the same such account. I also understand that this debit transaction for payment of water, sewer and garbage will occur on the 11th of each month. If the 11th falls on a Saturday or Sunday the transaction will occur on the following business day.

Bank Name _____

City_____ State_____ Zip_____

Bank Routing Number _____

Account Number _____

Customer Name as it appears on the account_____

Customer Telephone Number _____

Account Type: ____Personal Checking ____Personal Savings

____Business Checking ____Business Savings

This authorization is to remain in full force and effect until company has 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.

The company reserves the right to reverse a debit in the event a customer was debited in error.

Customer's name (print) _____

Signed _____Dated_____

Property Location_____

Customer ID: _____ Effective Date: _____

_____Send copy to customer

Return completed form to: City of Cresco, 130 N Park Pl, Cresco, IA 52136

Rev.5/30/2019
DDAUTH