Village of Wellsville
Department of Public Utilities
23 North Main Street * Wellsville, New York 14895
Phone: (585) 596-1760 * FAX: (585) 593-3938
711(TDD)

AUTHORIZATION AGREEMENT FOR AUTOMATIC CLEARINGHOUSE PAYMENTS

I (we) hereby authorize the Village of Wellsville, Department of Public Utilities, hereafter called COMPANY, to initiate debit entries to my (our) checking/savings account indicated below and the depository named below, hereafter called DEPOSITORY, to debit the same to such account.

Depository/
Bank Name _____ ***Branch*** _____

City _____ ***State*** _____ ***Zip*** _____

Transit/
Routing # _____ ***Checking or Savings (select one please)***
Account # _____

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

Applicant
Name(s) _____

DPU Account # _____ ***Telephone #*** _____

Signed X _____ ***Date*** _____

Signed X _____ ***Date*** _____

(ATTACH COPY OF VOIDED CHECK/DEPOSIT SLIP BELOW):

John Doe ***1234***
123 Main St
Hometown, ZZ 12121

Pay to the order of _____ ***$*** _____

Bank Name

For _____ _____

/:099909999/ ***// "23""45678 9//*** ***1234***
Transit/Routing Number ***Account Number*** ***Check Number***

"This institution is an equal opportunity provider and employer. To file a complaint of discrimination write: USDA, Director, Office of Civil Rights, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, or call (800) 795-3272(voice) or (202) 720-6382(TDD)."