

ACH AUTHORIZATION

I, _____, hereby authorize the City of Waukon to make an auto payment from my checking account _____ (account number) at _____ (bank), bank routing number _____ for my water/sewer/garbage bill.

This auto payment transfer will be done on the 15th day of the month in which my quarterly bill is due.

I am aware that I am responsible to notify the City of Waukon of any changes to my account information.

Please enclose a VOIDED CHECK for the account from which you want payment to be deducted.

Customer

Billing Service Address

Date