Debit Authorization

I (we) hereby authorize Nebo Water District, hereinafter called COMPANY, to initiate debit entries to my (our) account indicated below and the financial institution named below, hereinafter called FINANCIAL INSTITUTION, to debit the same to such account for utility. I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of U.S law.

	Financial Institution Nan	ne
D		Account Number
Routing Number	r	Account Number
Type of Account:Checking	Savings	
This authority is to retain in full me (or either of us) of its termina FINANCIAL INSTITUTION a	ation in such time and manner as	
Print Individual Name	Phone Number	Signature
NWD Account Number		 Date

ATTACH COPY OF VOIDED CHECK TO THIS FORM