

Automatic Clearing House (ACH) Authorization Agreement

I hereby authorize and request the Village of Elkhart Lake (Village) to receive payments of amounts owed by me for Village water and sewer charges by initiating quarterly, on the 1st business day of February, May, August, and November, debit entries to my account at the Banking Institution (Bank) indicated below. I hereby authorize and request Bank to accept debit entries initiated by the Village and to debit the same to my account without liability for the correctness of entries.

Account Info	ormation		
Water/Sewer A	ccount Number:		
Customer Name	e:		
Service Add	ress		
Street Address:			
Elkhart Lake, WI 53020		Home phone #: ()
		Cell phone #: ()	
	en form at least twenty fiv		at any time by notifying the ore the debit date, notification
Customer Signa	nture:		
Date:			
	o authorize the Village to sage of any changes to my e		ny email account. I will hold them responsible if I do
Email Address:			
Please circle	the type of account y	ou are using:	
Personal Checking	Commercial Checking	Personal Savings	Commercial Savings
Banking Institu	tion:		
Bank Routing #	:		
Bank Account #	# :		

Please attach an original check on which you've written "VOID" or a copy of a paid check from the financial account you want debited. Return to the Village Hall.