

AUTHORIZATION AGREEMENT FOR DIRECT PAYMENTS  
(ACH DEBITS)

Company  
Name Creston City Water Works

Company  
ID Number 42-6004448

I (we) hereby authorize Creston City Water Works, hereinafter called COMPANY, to initiate debit entries to my (our) account indicated below at the depository financial institution named below, hereafter called DEPOSITORY, and to debit the same to such account. I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of U.S. law.

Depository  
Name \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Routing Number \_\_\_\_\_ Account Number \_\_\_\_\_

Type of Acct: \_\_\_\_\_ Checking \_\_\_\_\_ Savings

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

Name(s) \_\_\_\_\_  
Please Print

Signature \_\_\_\_\_ Date \_\_\_\_\_

**PLEASE ATTACH COPY OF VOIDED CHECK TO THIS FORM**