

BEAR CREEK WATER ASSOCIATION, INC.

AUTHORIZATION AGREEMENT FOR AUTOMATIC PAYMENTS

NAME: _____ **PHONE:** _____
(AS IT APPEARS ON FINANCIAL INSTITUTION RECORDS)

ADDRESS: _____ **CITY:** _____ **ZIP:** _____

FINANCIAL INSTITUTION NAME: _____

ROUTING#: _____ **CHECKING ACCOUNT#:** _____

I hereby authorize the Financial Institution named above to pay my monthly water bill by charging each payment to my account and to make that deduction payable to the order of BEAR CREEK WATER ASSOCIATION, INC. I agree that each payment shall be the same as if it were an instrument personally signed by me. This authority is to remain in effect until revoked by me in writing. In addition, I have the right to stop payment of a charge by timely notification to my Financial Institution and BEAR CREEK WATER ASSOCIATION, INC. reserve the right to terminate this payment plan (or my participation therein).

DATE: _____ **SIGNATURE:** _____

NOTE: Please return one completed copy of this authorization and a **VOIDED** check on your account to: BEAR CREEK WATER ASSOCIATION, INC., P. O. BOX 107, CANTON, MS 39046. Draft will occur on or around the 20th of each month.

THERE IS NO CHARGE FOR THE DRAFTING OF YOUR WATERBILL!!

BEAR CREEK ACCOUNT NUMBER: _____

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