

Authorization for ACH Debit

This authorizes Sevier County Water Department
to send debit entries (and appropriate credit and adjustment entries), electronically or by any other commercially accepted method, to my (our) account(s) indicated below and to other accounts I/ (we) identify in the future (the "Account"). This authorizes the financial institution holding the Account to post all such entries. This authorization will remain in effect until the Company receives written termination notice from myself and has reasonable opportunity to act on it.

(Financial Institution Name)

(Address)

(City/State)

(Zip)

(Routing Number)

(Account Number)

Type of Account: Checking Savings

Debit Amount: \$ _____ Full Amount Due Minimum Amount Due

Single Debit Transaction Recurring Debit Transaction

Beginning Date: _____

Should the debit transaction amount due fall on a Federal Reserve legal banking holiday, the debit will post to my account on the next business day.

Print Name: _____ Water Bill Account #: _____

Signature: _____ Date: _____

PLEASE ATTACH COPY OF VOIDED CHECK TO THIS FORM

Notes:

- All written debit authorizations must provide that the Receiver may revoke the authorization only by notifying the Originator in the manner specified in the authorization.
- Single entry reversals do not require authorization by the Receiver. Therefore, previously recommended language regarding the initiation of possible debit entries is no longer stated in the authorization.
- The underlined language in the authorization above represents the disclosure requirement associated with the clarification of OFAC economic sanction policies upon ACH Network Participants.

