

AUTHORIZATION AGREEMENT FOR DIRECT PAYMENTS

Automatic Debits (Auto Pay)

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I hereby authorize, Borrego Water District, herinafter called BWD, to initiate debit entries and adjustments for any debit entries in error to my: (Please check one)	
[] Checking Account	[] Savings Account
At the depository institution named below, hereinafter called DEPOSITORY, and to debit or credit the same to such account.	
FOR ACCOUNT VERIFICATION, PLEASE ATTACH A COPY OF A CHECK OR A VOIDED CHECK.	
Name of Depository (Bank/Credit Union/Savings in Loan, etc.)	Branch Location
City	State/Zip
Transit/ABA/Routing Number	Bank Account Number (Including zeros before account number)
This authority is to remain in full force and effect until BWD has received written notification from me of it's termination in such time and in such manner as to afford BWD and DEPOSITORY a reasonable opportunity to act on it.	
Name (please print)	BWD Customer Account Number
Signature	Date
NOTE: 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.	
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