

CITY OF DEMING
AUTHORIZATION AGREEMENT
FOR AUTOMATIC PAYMENT (ACH DEBITS)

City of Deming (the "City")

I (we) authorize the City to initiate entries to debit my (our) account described below:

Checking Account #: _____ OR Saving Account #: _____

Financial Institution: _____

Financial Institution Address: _____

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

Signature: _____ Signature: _____

Full Name: _____ Full Name: _____

Phone Number: _____ Phone Number: _____

Utility Account # (s) _____

Attach a voided check

Terms:

ACH payments will be uploaded one day prior and drawn on the due date, unless the date falls on a non-working day. In such cases, payment will be withdrawn the next working day. If ACH payments are returned for insufficient funds utility accounts may be removed from ACH authorization without notice.

Cut bottom for customer's receipt

Retain this portion for your records

On _____ (date) I authorized

City of Deming

P.O. Box 706

Deming NM 88031

(575) 546-8848

To initiate electronic entries to my checking/savings account and agree to the terms listed on the authorization from, for payment of utility service billed.

To cancel this authorization, it must be in writing.