

**CLEAR LAKE CITY WATER AUTHORITY
900 BAY AREA BOULEVARD
HOUSTON, TEXAS 77058
(281) 488-1164**

AUTHORIZATION AGREEMENT FOR AUTOMATED PAYMENTS

I (we) hereby authorize CLEAR LAKE CITY WATER AUTHORITY to initiate debit entries to my (our) checking or savings account indicated below and the BANK named below to debit same to such account. A VOIDED check (or copy of same) is enclosed.

CUSTOMER INFORMATION (PLEASE PRINT):

WATER BILL ACCOUNT # _____ DAYTIME PHONE # _____

NAME ON ACCOUNT (PLEASE PRINT) _____

SERVICE ADDRESS _____

BANK INFORMATION (PLEASE PRINT)

BANK NAME _____ TELEPHONE # _____

CITY _____ STATE _____ ZIP _____

TYPE OF ACCOUNT (Check one) Checking

BANK ROUTING/TRANSIT# _____ ACCOUNT # _____
(YOU CAN OBTAIN THIS INFORMATION BY CALLING YOUR BANK)

This Authority is to remain in full force and effect until CLEAR LAKE CITY WATER AUTHORITY and BANK have received written notification from me (or either of us) of its termination in such time and in such manner as to afford Clear Lake City Water Authority and Bank a reasonable opportunity to act upon it.

PLEASE PRINT – AUTHORIZED SIGNATURE ON BANK ACCOUNT

SIGNATURE

DATE

PLEASE INCLUDE A VOIDED CHECK OR COPY OF A VOIDED CHECK WHEN YOU RETURN THIS FORM.

FOR OFFICE USE

CYCLE # _____ BANK ID # _____

BANK DRAFT DATA ENTERED (Date) _____ BANK TEST (Date) _____