



VILLAGE OF  
**HAMEL**  
ILLINOIS

# AUTHORIZATION AGREEMENT FOR ACH PAYMENTS FOR UTILITY SERVICE

111 SOUTH OLD U.S. ROUTE 66 | HAMEL, IL 62046 | P: 618.633.2484

I (we) hereby authorize **VILLAGE OF HAMEL**, hereinafter called **COMPANY**, to initiate debit entries to my (our)  CHECKING or  SAVINGS account (*please select one*) indicated below and the depository named below, hereinafter called **DEPOSITORY**.

These debits are to be paid in the amount billed for utilities beginning on \_\_\_\_\_ and will continue on the 22nd day of each month thereafter.

DEPOSITORY NAME: \_\_\_\_\_

TRANSIT/ABA NO.: \_\_\_\_\_

ACCOUNT NO.: \_\_\_\_\_

This authorization is to remain in full force and effect until **COMPANY** and **DEPOSITORY** have received written notification from me (or either of us) of its termination in such time and in such manner as to afford **COMPANY** and **DEPOSITORY** a reasonable opportunity to act on it.

CUSTOMER NAME(S): \_\_\_\_\_

UTILITY ACCT NO.: \_\_\_\_\_

CUSTOMER SIGNATURE(S): \_\_\_\_\_

DATE: \_\_\_\_\_

ATTACH YOUR CANCELLED CHECK HERE