

# VILLAGE OF ELIDA, OHIO

## AUTHORIZATION AGREEMENT FOR PREAUTHORIZED PAYMENTS

COMPANY: Village of Elida, Ohio Company ID No. 34-6407983

I (we) hereby authorize Village of Elida, Ohio Utility Department, hereinafter called **COMPANY**, to initiate debit entries to my (our) checking/savings account indicated below and the depository named below, hereinafter called **DEPOSITORY**, to debit the same to such account.

DEPOSITORY (BANK) NAME: \_\_\_\_\_

BRANCH: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

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

\*\*\*\*\**Attach voided check & Return to:*  
*Village of Elida, 406 E. Main St., Elida, Ohio 45807*\*\*\*\*\*

TYPE OF ACCOUNT:      CHECKING    SAVINGS    (Please circle one)

The authority 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.

NAME (S) \_\_\_\_\_

ADDRESS \_\_\_\_\_

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

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

\*\*\*\*\*

### FOR OFFICE USE ONLY:

Account # \_\_\_\_\_ Name \_\_\_\_\_

Address \_\_\_\_\_

Date Active: \_\_\_\_\_