

AUTHORIZATION FOR PRE-AUTHORIZATION PAYMENTS

Company Name: North Hopkins Water Supply Company ID Number: _____

I (we) hereby authorize North Hopkins Water Supply Corp., hereinafter called COMPANY, to initiate debit entries to my (our) checking _____ savings _____ account (select one) indicated below and the depository named below, hereinafter called DEPOSITORY, to debit the same to such account.

DEPOSITORY

Name: _____ Branch: _____

City: _____ State: _____ Zip: _____

Transit/ABA # _____ Account: _____

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

NAME(S) _____ ID # _____

SIGNATURE _____ DATE _____

Please attach a voided check if a checking account is selected.

FOR COMPANY USE ONLY

Date received: _____ Processed by: _____