

**EAGLE LAKE WATER DISTRICT**

**ELECTRONIC FUNDS TRANSFER AUTHORIZATION**

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To whom it may concern:

I have given authorization to Eagle Lake Water District, Inc. to debit any money owed to them directly from my bank account as specified below. These debits will begin on or about \_\_\_/\_\_\_/\_\_\_\_. The drafts will be for the amount of the monthly bill. This authorization will remain in effect until revoked by me in writing.

(please print)

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

ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

CITY: \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_ - \_\_\_\_\_

BANK NAME: \_\_\_\_\_

BANK CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_ - \_\_\_\_\_

BANK R/T NUMBER: \_\_\_\_\_

BANK ACCOUNT NUMBER: \_\_\_\_\_

(Important – Attach a voided check)

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

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