

**AUTHORIZATION AGREEMENT FOR PREAUTHORIZED ACH  
DEBITS/CREDITS**

**CUSTOMER NAME:** \_\_\_\_\_  
**MAILING ADDRESS:** \_\_\_\_\_  
**SERVICE ACCOUNT #:** \_\_\_\_\_  
**SERVICE ADDRESS:** \_\_\_\_\_

I (we) hereby authorize CRESTVIEW WATER AND SANITATION DISTRICT hereafter called COMPANY, to initiate debit entries to my (our) Checking or Savings account indicated below and the depository named below, hereinafter called DEPOSITORY, to credit and/or debit the same to such account.

**DEPOSITORY NAME:    GUARANTY BANK & TRUST COMPANY**

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

**E-mail Address:** \_\_\_\_\_  
Email Only Billing    YES    NO

**SIGNED** \_\_\_\_\_

**SIGNED** \_\_\_\_\_  
(MUST BE SIGNED BY AN AUTHORIZED SIGNER)

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

COMPLETED FORM WITH AN ATTACHED VOIDED CHECK MUST BE RETURNED TO  
CRESTVIEW WATER & SANITATION DISTRICT  
BEFORE THE AUTOMATIC WITHDRAWAL PROGRAM CAN BEGIN.

**\*\*\* One time \$5.00 credit offered to customers electing to enroll in both the  
Automatic Withdraw Program and Email only billing\*\*\***