



HARLINGEN
WATERWORKS
SYSTEM

CREDIT / DEBIT AUTHORIZATION FORM

I (we) hereby authorize the HARLINGEN WATERWORKS SYSTEM (the Waterworks) to initiate transactions to my (our) checking account at the financial institution listed below (the Financial Institution); and if necessary, initiate adjustments for any transactions credited and or debited in error.

This authorization will remain in effect until the Waterworks is notified by me (us) in writing to discontinue drafting. To afford the Waterworks and the Financial Institution a reasonable opportunity to act, **10 days advance notice are required for both the authorization and the notice to discontinue drafting to become effective.**

I (we) understand my (our) account will be drafted each month for the amount owed on the due date of my (our) monthly bill; and transfer of service to a new address will automatically set the new address to bank draft.

A voided check must be submitted along with this form. All funds must be drawn on a bank located in the United States.

(Please Print)

Waterworks Account Number: _____

Service Address: _____

Customer Name: _____ Phone: _____

Mailing Address: _____

City: _____ State _____ Zip _____

Driver License Number _____ State _____

Financial Institution Routing/Transit Number _____

(Look between these symbols 1: :1 on the bottom left of check)

Financial Institution Account Number: _____ Type of Account: _____

Financial Institution Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Signature of Account Holder: _____

This authorization form becomes the property of PLAINSCAPITAL BANK when a transaction is generated under this agreement.

Received by (Waterworks Representative): _____

Date Received: _____ Effective Date: _____