



# PUBLIC WATER SUPPLY DISTRICT #16

*of Jackson County Missouri*

P.O. Box 88 • Sibley, Missouri 64088

(816) 650-5537

(816) 249-6043 - Fax

## ACH Authorization Agreement for Payments/Debits

I (we) hereby authorize Public Water Supply District #16 to initiate debit entries to my (our) account indicated below for purpose of payment of my (our) water utility bill. Payment will be pulled the date that payment is due or on the next business day.

Financial Institution Name: \_\_\_\_\_

Routing  
Number: \_\_\_\_\_

Account  
Number: \_\_\_\_\_

Circle One:    Checking Account            Savings Account

This authorization is to remain in full force and effect until Public Water Supply District #16 has received written notification from me (or either of us) of its termination in such time and in such manner as to afford Public Water Supply District #16 and Depository a reasonable opportunity to act on it.

Name(s): \_\_\_\_\_  
(Please Print)

Water District Account #: \_\_\_\_\_

Address: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

-----PLEASE ATTACH A VOIDED CHECK-----