



CELINA UTILITIES

AUTHORIZATION FOR AUTOMATIC PAYMENT

I (we) hereby authorize Celina Utilities to initiate credit entries and to initiate, if necessary, debit entries and adjustments for any credit entries in error to my (our) checking or savings account indicated below.

BANK NAME:

BANK ACCOUNT NUMBER:

BANK ROUTING NUMBER:

SAVINGS OR CHECKING:

This authority is to remain in effect until company has received written notification from me (or either of us) to terminate this agreement.

CUSTOMER NAME:

CUSTOMER ADDRESS:

CUSTOMER TELEPHONE NUMBER:

CUSTOMER ACCOUNT NUMBER:

DATE:

DATE:

OWNER SIGNATURE (S)

CELINA UTILITY REPRESENTATIVE

PRINTED NAME (S)

PRINTED NAME

CELINA UTILITIES

YOUR LOCAL ELECTRIC – WATER – SEWER PROVIDER