

PUBLIC UTILITY DISTRICT NO. 2

OF

PACIFIC COUNTY



405 Duryea Street
P.O. Box 472
Raymond, Washington 98577
(360) 942-2411 FAX (360) 875-9388

9610 Sandridge Road
P.O. Box 619
Long Beach, Washington 98631
(360) 642-3191 FAX (360) 642-9389

ACH Authorization Agreement

I (we) hereby authorize Public Utility District No. 2 of Pacific County (“PUD”), to initiate debit entries to my (our) Checking Account Savings Account (select one) indicated below at the depository financial institution named below, hereinafter called “Bank”, and to debit the same to such account. I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of U.S. law.

Name _____

Phone # _____ PUD Acct # _____

Bank Name _____

Routing # _____ Account # _____

**Ask about how to receive a \$20 one-time bill credit
(Smarthub account required, contact your local office for assistance)**

This authorization is to remain in full force and effect until the PUD has received written notification from me (or either of us) of its termination in such time and in such manner as to afford Public Utility District #2 of Pacific County and BANK a reasonable opportunity to revoke it.

Customer
Signature _____ Date _____

PLEASE INCLUDE A COPY OF A VOIDED CHECK

Your payment will be deducted from your bank account indicated

5th _____ 20th _____

Customers participating in paperless billing can choose from the following dates (mark with “X”): :

5th _____ 12th _____ 20th _____ 27th _____

PUD USE ONLY:

Employee
Signature _____ Date _____

Paperless Customer (circle)? YES NO

5/2022