



Raymond (360) 942-2411
Long Beach (360) 642-3191
Naselle (360) 484-7454

AUTHORIZATION AGREEMENT FOR DIRECT PAYMENTS (ACH DEBITS)

NAME _____

PUD ACCT # _____ BR # _____

I (we) hereby authorize Public Utility District #2 of Pacific County, 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/DEPOSITORY, 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.

BANK
NAME _____

ROUTING ACCOUNT
NUMBER _____ NUMBER _____

This authorization is to remain in full force and effect until Public Utility District #2 of Pacific County 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/DEPOSITORY a reasonable opportunity to revoke it.

DATE _____ SIGNATURE _____

DATE _____ EMPLOYEE
SIGNATURE _____

PLEASE INCLUDE A COPY OF A VOIDED CHECK