



AUTHORIZATION AGREEMENT FOR PRE-AUTHORIZED PAYMENTS  
(DEBITS)

I (we) hereby authorize the City of Mendota to initiate debit entries to my account for water bill account(s) listed above and to initiate, if necessary, credit entry adjustments for any debit entries made in error to my (our) account indicated below and the depository institution named below.

Customer Account Name: \_\_\_\_\_

Customer Account Address: \_\_\_\_\_

Water Bill Account: \_\_\_\_\_

Depository Institution: \_\_\_\_\_

Depository Institution City/ State: \_\_\_\_\_

ABA (Routing) #: \_\_\_\_\_

Bank Account #: \_\_\_\_\_

Please attach a voided check

The authority is to remain in full force until the City of Mendota has received written notification from me (us) of its termination.

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

Signed: \_\_\_\_\_  
Authorized signer on above account