## AUTOMATIC CLEARING HOUSE (ACH) AUTHORIZATION AGREEMENT

I hereby authorize and request the Village of Cleveland to receive payments of amounts owed by me for Village water and sewer charges by initiating on the due date debit entries to my account at the Banking Institution indicated below.

I hereby authorize and request the Banking Institution indicated below to accept debit entries initiated by the Village of Cleveland and to debit the same to my account without liability for the correctness of the entries.

Account Information	
Utility Acct Number:	
Customer Name:	
Service Address Street:	, Cleveland WI 53015
<b>Customer Contact Informatio</b>	on
Mailing Address:	
City/State/Zip:	
Phone Number:	
Cleveland in written form at least (5) bu	withdraw from participation at any time by notifying the Village of siness days before the due date. Notification shall be effective upon age Clerk. Drop off or send notifications to the Village Clerk's Office, d, WI 53015.
Customer Signature: (Customer	signing this form must be named on the account for the Agreement to be valid.)
Date:	
Please circle the type of account you are	using:
Checking Acco	ount (include voided check) Savings Account
Banking Institution:	
Bank Routing Number:	
Bank Account Number	

Return this completed form to the Village Clerk's Office. Automatic deductions will begin on the due date of the first regular monthly bill generated AFTER the form is filed. ACH payments will include the entire balance due.

Any rejected or returned ACH payments are subject to a \$25.00 NSF fee.