

PLEASE RETURN WITH VOIDED CHECK

Fayette Water Supply Corporation

PO Box 724
La Grange, TX 78945
979.968.6475
TDD: 800.735.2988

AUTHORIZATION AGREEMENT FOR PREAUTHORIZED PAYMENTS

Company Name: **FAYETTE WATER SUPPLY CORPORATION** Company ID Number: **74-1848777**

I (we) hereby authorize **FAYETTE WATER SUPPLY CORPORATION**, hereinafter called COMPANY, to initiate debit entries to my (our) Checking account indicated below and the depository named below, hereinafter called DEPOSITORY, to debit the same to such account.

Depository Name: _____ Branch: _____

City: _____ State: _____ Zip: _____

Routing/Transit/ABA No: _____ Account No: _____

This authority is to remain in full force and effect until COMPANY and DEPOSITORY has received written notification from me (or either or us) of its termination in such time and in such manner as to afford COMPANY and DEPOSITORY a reasonable opportunity to act on it.

Name(s): _____ FWSC Account No: _____

Date: _____ Signed X _____

Signed X _____