

CITY OF COWETA  
CUSTOMER AUTHORIZATION  
FOR AUTOMATED DEBIT ENTRIES

**AUTHORIZED AGREEMENT FOR DIRECT PAYMENTS**

I (we) hereby authorize City of Coweta to initiate debit entries to my (our)

\_\_\_\_\_ Checking Account                      \_\_\_\_\_ Savings Account

Indicated below and the depository named below, hereinafter called  
DEPOSITORY, to debit same to such account to pay Utility Account  
# \_\_\_\_\_.

DEPOSITORY  
(BANK) NAME \_\_\_\_\_ BRANCH \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

TRANSIT/ABA (ROUTING) # \_\_\_\_\_ ACCT # \_\_\_\_\_

This authority is to remain in full force and effect until COMPANY and DEPOSITORY has received written notification from me (or either of 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) \_\_\_\_\_ ID # \_\_\_\_\_  
(LAST 4 OF SSN OR D.L. NUMBER)

DATE \_\_\_\_\_ SIGNED \_\_\_\_\_

Mailing Address: City of Coweta  
Attn: Billing Clerk  
P.O. Box 850  
Coweta, OK 74429