

AUTHORIZATION AGREEMENT FOR PREAUTHORIZED PAYMENTS

- New ACH account
- Change Bank Information

I (we) hereby authorize the Village of Oregon to initiate debit entries to my (our)
[] Checking [] Savings account (select one) indicated below and the financial institution named
below, to debit my (our) account for the payment of water and sewer bills.

FINANCIAL INSTITUTION

Name _____ Branch _____

City _____ State _____ Zip _____

Transit/Routing# _____ Acct # _____

This authority is to remain in full force and effect until the Village of Oregon and the above
named Financial Institution have received written notification from me (or either of us) of its
termination and in such time and in such manner as to afford both parties a reasonable
opportunity to act on it.

NAME(S) ON THE ACCOUNT _____

ADDRESS: _____

UTILITY BILLING ACCOUNT NO.: _____

PHONE NO.: _____

TODAY'S DATE: _____

SIGNATURE _____

Your bill will indicate when ACH debit is activated.

PLEASE ATTACH A VOIDED CHECK

Please Return Completed Form to:

Village of Oregon
117 Spring Street
Oregon, WI 53575