



AUTHORIZATION AGREEMENT FOR PREAUTHORIZED PAYMENTS

- New account
- Change bank existing account

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

Bank Name: _____ Branch _____
City _____ State _____ Zip _____
Bank Routing Number: _____ 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
101 Alpine Parkway
Oregon, WI 53575
608-835-3118