

BDM RURAL WATER SYSTEM, INC.

(Please attach a voided check and mail to the BDM office.)

ACH Direct Payment Authorization

I authorize BDM Rural Water System, Inc. to initiate electronic debit entries to my:

() checking account or () savings account in the amount of my water bill. This authority will remain in effect until I have cancelled it in writing. I can stop payment of any entry by notifying BDM Rural Water System, Inc. My account will be charged the amount due on my water bill on **approximately** the 15th of each month.

Name on BDM Account: _____

BDM Account Number(s): _____

Phone Number: _____

Email Address: _____

Name on Bank Account: _____

Financial Institution Name: _____

Financial Institution Address: City _____ State _____

Account Number at Financial Institution: _____

Account Type: () Checking Account or () Savings Account

Financial Institution/Transit Number: _____

Signature: _____

(Print form and sign)

Date: _____

Office Use Only:

Date Received: _____ Date Cancelled: _____