



City of Chadron
 P.O. Box 390
 Chadron, NE 69337
 (308)432-0500
 FAX (308)432-0503

AUTHORIZATION AGREEMENT FOR PRE-ARRANGED UTILITY PAYMENTS

I, _____, hereby authorize the City of Chadron, hereinafter called COMPANY, to initiate debit entries (withdrawal of money) and initiate, if necessary, credit entries and adjustments for any debit entries in error to my account indicated with the depository named below, hereafter called FINANCIAL INSTITUTION. The purpose of this debit is for payment of my City of Chadron utility billing which is due every month. I understand that this amount will vary dependent upon usage. I am also aware that I will receive regular utility bills every month that will indicate the amount and the approximate date of collection against the account listed below. It is understood that in case of any utility billing or collection error, the adjustments will be made directly with the COMPANY and the FINANCIAL INSTITUTION will not be held responsible. I further acknowledge the origination of ACH transactions to my account must comply with the provisions of U.S. law. This includes, but is not limited to, sanctions enforced by the Office of Foreign Assets Control. This authorization is to remain in full force and effect until COMPANY and FINANCIAL INSTITUTION have received written notification from me on its termination in such time and in such manner as to afford COMPANY a reasonable time to act on it.

FINANCIAL INSTITUTION INFORMATION:

Bank Name: _____

Bank Address: _____ City _____ State _____

Routing No.: _____ Account No.: _____

Checking Acct. _____ or Savings Acct. _____ (Check One)

City of Chadron Utility Account Number: _____

Service address: _____ Chadron, NE

AUTHORIZED SIGNATURE: _____

DATE: _____

***** ATTACH A VOIDED CHECK *****