KWP Utility Company
PO Box 2151
Tunica, MS 38676

ACH Payment Authorization Form

I (we) authorize _____to electronically debit my (our) account (And, if necessary, electronically credit account to correct erroneous debits) as follows:

Bank Account Type (select one):

☐ Personal Checking Account ☐ Personal Savings Account

I authorize electronic ACH debits / credits to the depository financial institution named below ("Financial Institution"). I (we) agree that ACH transactions I (we) authorize comply with all applicable laws.

Name on Account:		Bank Name:
Bank Account Number:	Bank Routing #:	Bank City/State:

Date(s) and/or frequency of debit(s) and Amount:

☐ One time ☐ Recurring

Dollar Amount Authorized:	Amount as Billed on Monthly Statement

Name(s) *(please print):*	
Date:	
Signature(s):	

I certify that the information above is correct, that I am an authorized signer or designate of the account provided for ACH transactions, and that I am authorized to provide this information.

I authorize KWP Utility Company to deduct my monthly utility payments from this bank account via Electronic Fund Transfer. I understand sending a written notification to KWP Utility Company will revoke this authorization as long as I request and deliver this written notice at least three days prior to the scheduled settlement date.

KWP Utility Compnay reserves the right to cancel Electronic Fund Transfers due to insufficient funds without notice.