



**BANK TRANSFER AUTHORIZATION FORM**

I authorize South Side Electric, Inc. to electronically debit my bank account according to the terms outlined below. I acknowledge that electronic debits against my account must comply with United States law.

**Terms of billing:**

Starting (month)\_\_\_\_\_ (year)\_\_\_\_\_ 10<sup>th</sup> or 15<sup>th</sup> or 20<sup>th</sup> or 25<sup>TH</sup> (circle) in the amount of the monthly invoice and any outstanding invoices, late fees or finance charges.

Or a Standard payment of \_\_\_\_\_ if the amount due exceeds the available credit the amount due will be ran instead of the standard payment.

**Customer Bank Information**

Name of Banking Institute \_\_\_\_\_

Routing Number \_\_\_\_\_

Account Number \_\_\_\_\_

Checking Account  Savings Account

This payment authorization is to remain in effect until the owner of the bank account notifies South Side Electric, Inc. of its cancelation by giving written notification in enough time for the business and receiving institution to have a reasonable opportunity to act on it.

By signing up for autopayments you are also signing up for paperless billing.

\_\_\_\_\_  
Customer Signature Date

Name on the South Side Electric, Inc. Account \_\_\_\_\_

Account Number \_\_\_\_\_

Email for receipt and Paperless billing \_\_\_\_\_

Contact Phone Number \_\_\_\_\_