GOLDEN VALLEY WATER AUTHORIZATION AGREEMENT FOR AUTOMATIC WITHDRAWAL

I hereby authorize Golden Valley Water to initiate debit and, if necessary, credit entries to my account indicated below for my Golden Valley Water bill. I understand that the amount deducted will be my balance due indicated on the current bill. The withdrawal will take place on the 15th of each month or the next business day if the 15th falls on a holiday or weekend. I acknowledge that this authorization is to remain in effect until Golden Valley Water has received written or verbal notification of its termination.

THERE WILL BE A SERVICE CHARGE IF FUNDS ARE NOT AVAILABLE

PLEASE PRINT CLEARLY			
Name:			
Golden Valley Account #:			
Address:			
Phone Number:			
	<u>Attach a voidea</u>	l check to form	
	John Jores 124 Main Street 124	Check Number (do not include)	
Name of Bank:			
9-Digit Routing #:			
Account #:		-	
Type of Account:	Checking Sa	avings (check one)	
Attach a voided check to	<u>form</u>		
Date			
Cianaturo			

Please mail completed form to:

Golden Valley Water PO Box 588 Black Hawk, SD, 57718