

RED OAK SANITATION & RECYCLING

AUTHORIZATION AGREEMENT FOR PREAUTHORIZED PAYMENTS

I hereby authorize Red Oak Sanitation to initiate a debit entry to my checking account indicated below at the depository named below to debit the same such account. I am aware that my checking account will be debited any time between the 2nd through the 5th, of every month.

Depository Name _____

Branch _____

City _____

State _____ *Zip* _____

Routing Number _____

Account Name _____

Account Number _____

Amount _____

This authorization is to remain in full effect until _____ has received written notification from me of its termination in such time and in such a manner to afford reasonable time to act upon it.

By _____

Account# _____

Date _____

PLEASE ATTACH A VOIDED CHECK TO THIS FORM!!