

ACH DEBIT AUTHORIZATION FORM


Authorization Agreement for Pre-Arranged Payments (ACH Debits)

I (we) _____ hereby authorize L & W Garbage, Inc. to initiate debit entries to my (our) Checking/Savings account indicated below and the depository named below to debit the same from such account.

Note: The dollar amount indicated will be drawn from the account indicated below on the 15th day of the month...if the 15th falls on a weekend, it will be taken out the next business day.

Recurring Set Amount: \$ _____ (Total for year-round services)

Note: If you choose to have yard service, the debit will increase by \$14.00 from April to November.

Please initial here if you are going to have yard service:  _____

(Prices are subject change. We will notify you of any changes)

Bank Name: _____

Bank Address: _____

Routing Number: _____

Account Number: _____

Account Type: Checking Savings

Important Notice: In order to cancel this recurring ACH Debit Authorization, a notice of at least ten (10) business days prior to the next payment date is required.

Date: _____

Name (print): _____

Signature: _____

Name (print): _____

Signature: _____

Please attach a voided check for account verification purposes.

*Routing and Account
Number Locations*

