Complete form, attach a voided check and return to:

BCPU
P O BOX 469
Bolivia NC 28422

BRUNSWICK COUNTY PUBLIC UTILITIES BANK DRAFT AUTHORIZATION

AUTHORIZATION AGREEMENT ACH (BANK DRAFT) PREAUTHORIZED PAYMENT (DEBITS)

I hereby authorize Brunswick County Public Utilities, hereinafter called COUNTY, to initiate credit entries or such adjusting entries, either debit or credit, which are necessary for corrections, to my Checking_____Savings_____ account indicated below and the financial institution named below to credit (or debit) the same to such account. Bank Draft is only processed on the due date each month. **A *voided check* will be required for processing purposes**.

FINANCIAL INSTITUTION NAME CITY STATE

TRANSIT/ROUTING NUMBER ACCOUNT NUMBER

This authorization is to remain in full force and effect until COUNTY has received written notification from me of its termination in such time and in such manner as to afford COUNTY a reasonable opportunity to act on it. In an effort to prevent Identity Theft, please include a copy of your driver's license.

NAME TELEPHONE NUMBER

E-MAIL

DRIVERS LICENSE NUMBER (PLEASE SEND COPY OF YOUR LICENSE)

SERVICE ADDRESS ACCOUNT# & CUSTOMER #

SIGNATURE

Revision Date 03/05/2015