

**AUTHORIZATION AGREEMENT FOR  
AUTOMATIC PAYMENT PLAN**

I (we) hereby authorize Roaming Shores Utility to initiate debit entries to my (our) checking or savings account from the financial institution indicated below in order to deduct my bi-monthly water/sewer bill from the account listed.

Please complete the following :

Checking Account Number ..... \_\_\_\_\_  
Savings Account Number ..... \_\_\_\_\_

Financial Institution \_\_\_\_\_  
City \_\_\_\_\_, State \_\_\_\_\_ Zip \_\_\_\_\_  
Nine Digit Routing Number \_\_\_\_\_

Please attach a **VOIDED** check if you are using your checking account. If you are using your savings account please include a **VOIDED** savings withdrawal slip that includes the **NINE** digit routing number. If it is not printed on the withdrawal slip, ask your bank for the routing number.

If you change or close your account that you have listed above, **PLEASE** notify us in advance to avoid a return charge.

Name \_\_\_\_\_ Customer Account # \_\_\_\_\_  
Address \_\_\_\_\_  
Date \_\_\_\_\_ Signed \_\_\_\_\_  
*Customer Signature*

Please return this and the requested **VOIDED** form to :

Roaming Shores Utility  
2500 Hayford Road  
PO Box 237  
Roaming Shores, Ohio 44084