

**EAST SIDE WATER SYSTEM, INC.
2502 OPELOUSAS RD.
VILLE PLATTE, LA. 70586
PHONE (337)363-5547
FAX (337)363-5576**

BOARD MEMBERS:

John Vidrine, President
Neal Ardoin, Vice President
Monica Fontenot, Secretary/Treasurer
Kim Vidrine

BOARD MEMBERS:

Brenda Saucier
Daniel Fruge
Mark Jenkins

Authorization form for Direct Payment VIA ACH (ACH DEBITS)

Direct Payment via ACH is the transfer of funds for the purpose of making a payment.

I (we) authorize East Side Water System, Inc. to electronically debit my (our) account (and, if necessary, to electronically credit my (our) account to correct erroneous debits) as follows:

Select One: Checking Account Savings Account

At the depository financial institution named below ("DEPOSITORY"). I (we) agree that ACH transactions I (we) authorize comply with all applicable law.

Depository Name _____	ESWS Acct#:
Account Title _____	
Routing Number _____	
Account Number _____	

The amount of debit(s) will be determined by billed amount for the given month.

One debit per month on or around the 15th of every month will be the frequency of ACH debits.

I (we) understand that this authorization will remain in full force and effect until I (we) notify ESWS in writing, by phone, or by coming into the office, that I (we) wish to revoke this authorization. I (we) understand that ESWS requires at least 1 week notice prior in order to revoke this authorization. ESWS reserves the right to cancel electronic funds transfer at its own discretion.

Requested Start Date	
Name(s)	
Phone Number(s)	
Signature(s)	
Date	

Please attach a voided or copy of voided check.

"This institution is an equal opportunity provider and employer."

