



## ACH Authorization Agreements- ACH Debits

I (we) hereby authorize the **Village of Oakfield**, hereinafter called COMPANY, to initiate debit entries to my (our) Checking/Savings Account indicated at the financial institution named below, and any credit entries necessary to correct errors. I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of U.S. law.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Name of Financial Institution: \_\_\_\_\_

Address of Financial Institution: \_\_\_\_\_

Routing Number: \_\_\_\_\_

Account Number: \_\_\_\_\_ Account Type (circle one): Checking Account  
Savings Account

Amount (select one option) ☐ Amount Billed (Deducted on the due date of each billing cycle)  
☐ Specific Amount \$ \_\_\_\_\_

Frequency (circle one): 1<sup>st</sup> of each month 15<sup>th</sup> of each month

(If the 1<sup>st</sup> or 15<sup>th</sup> of the month is a non-processing day, I agree the transfer will then be made on the first processing day after the scheduled payment date.)

Beginning Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

This authorization is to remain in full force and effect until COMPANY has received written notification from me (or either of us) of its termination in such time and in such manner as to afford COMPANY and Bristol Morgan Bank a reasonable opportunity to act on it.

### Revocation of Authorized Agreement for Direct Debit (ACH Debit)

I hereby revoke the above authorization as of \_\_\_\_\_.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_