

MANVILLE WATER SUPPLY CORPORATION

AUTHORIZATION AGREEMENT FOR AUTOMATED PAYMENT (ACH DEBITS)

I (we) hereby authorize MANVILLE WATER SUPPLY CORPORATION, hereinafter called MANVILLE WSC., to debit my (our) Checking Account / Savings Account (*circle one*) at the banking institution named below. I (we) further authorize MANVILLE WSC to debit said account on/or about the 1011/1 of each month.

(Do not assume your account is drafting until you receive a confirmation letter from MANVILLE WSC) BANK NAME (S): CITY: **ROUTING NUMBER:** STATE: ZIP: ACCOUNT NUMBER: I understand that if the bank account being drafted is insufficient to pay my bill, I remain liable and responsible to pay the bill, including any additional fees that may apply. I further understand that I may revoke this authorization to debit my account for my water bill. If I revoke this authorization, I understand that I must give a 15 day written notice of such revocation to MANVILLE WSC. NAME ON MWSC ACCOUNT: PHONE (WORK) : MWSC ACCOUNT NUMBER : _____ PHONE (HOME): SIGNATURE: DATE:

Note: A voided check (or copy of check) MUST accompany this authorization for account verification purposes. Authorization not accompanied by a voided check will not be processed.

VOIDED CHECK HERE

RETURN BY MAIL: MANVILLE WSC PO BOX 248 COUPLAND, TX 78615 **RETURN BY FAX: 888-856-2242**