**BETHEL-ASH WATER SUPPLY CORPORATION**

PO Box 1385 Athens, Texas 75751

903-675-8466 Fax 903-677-5651

bethelash@embarqmail.com

**AUTHORIZATION FOR BANK DRAFT**

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Name of your bank

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Name as carried on bank account

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**ACH Routing Number *Verify ACH Routing number with your Financial Institution***

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Bank Account Number**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Your name

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Your Address

I hereby authorize Bethel-Ash Water Supply Corporation to draw monthly drafts on my account in your bank for current water bill account and service furnished to me by said cooperative and I do hereby authorize you to honor such drafts until such time as I may revoke this order.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Member Signature

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Effective Date BAWSC Account #

If you have more than one account, you will need to fill out a form for each account. You will receive a copy of your bill each month showing you how much was drafted to your account. This service is provided free for your convenience.