

I (we) hereby authorize the Town of New Market to initiate debit entries to my (our) Checking/Savings Account *(select one)* indicated below, at the depository financial institution named below, and to debit the same to such account. I (we) acknowledge that the amount due on the bill is the amount that will be deducted from my (our) account on the 15th of the month, or the next business day if the 15th falls on a weekend or holiday. I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of U.S. laws.

Account Name(s):			
Bank Name:			
Routing Number:			
Account Number:			
Chec	k 📃	Savings	

This authorization is to remain in full force, and effect until the Town of New Market has received written notification from me (or either of us), of termination. The Town of New Market will act on the termination request in a reasonable amount of time, as determined by state law.

Name(s):	
Utility Account #:	
Phone Number:	
Signature:	Date: