

# WHITE OAK SANITATION & RECYCLING

White Oak Sanitation

P.O. Box 1736

Gainesville, GA 30503

P: 706-367-0628

## *AUTHORIZATION AGREEMENT FOR PREAUTHORIZED PAYMENTS*

I hereby authorize White Oak Sanitation to initiate a debit entry to my checking account indicated below at the depository named below to debit the same such account. I am aware that my checking account will be debited any time between the 2<sup>nd</sup> and through the 5<sup>th</sup> of the quarter due.

Depository Name \_\_\_\_\_

Branch \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_

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

Account Name \_\_\_\_\_

Account Number \_\_\_\_\_

**This authorization is to remain in full effect until White Oak Sanitation has received written notification from me of its termination in such time and in such a manner to afford reasonable time to act upon it.**

Customer Signature \_\_\_\_\_

White Oak Account # \_\_\_\_\_

Date \_\_\_\_\_

***PLEASE ATTACH A VOIDED CHECK TO THIS FORM!!!***