

WHITEHALL ELECTRIC/WHITEHALL UTILITIES DIRECT PAYMENT PROGRAM AUTHORIZATION

I authorize Whitehall Electric/Whitehall Utilities to instruct my financial institution to make payments to them from the account indicated below. I understand that I may discontinue this free payment service at any time by notifying Whitehall Electric/Whitehall Utilities in writing.

Bank Information

Name of Financial Institution: _____

Routing Number: _____
(The first 9 digits on the bottom of your check.)

Account Number: _____

Type of Account: _____ Checking _____ Savings

CUSTOMER INFORMATION

Name (s) on Account: _____

Utility Account Number: _____

Street/Service Address: _____

Mailing Address (if different from above): _____

Phone Number: _____

Signature: _____

Date: _____

PLEASE ATTACH A COPY OF A VOID CHECK TO THIS FORM

- Your bill will automatically be deducted from your bank account on the due date.
- If there are insufficient funds in your bank account on the due date, a \$30.00 return fee will be charged and you will be required to pay the return check fee and bill by cash or money order.