

Utilities Account Number: _____

Account Address: _____

BANK AUTHORIZATION

Please complete and return this form to VIROQUA MUNICIPAL UTILITIES, And we will present it to your bank. Upon their approval, a debit will be presented to your bank for your Water/Sewer utility bill. **Please submit a voided check with this form.**

Date: _____

I, _____

Name

of _____

Address

Phone

ROUTING NUMBER

AUTHORIZING BANK:

Circle One

Peoples State Bank

075908658

Citizens First Bank

075902832

Royal Bank

075903116

Associated Bank

075900575

Westby Co-op Credit Union

275982539

Other Bank:

Name & Address: _____

Routing Number: _____

To accept from Viroqua Municipal Utilities, a debit against my checking account # _____, for payment of my utility water bill. The payment will be deducted between the 15th and the 20th of every month.

Signature

As of July 7, 1998, the above banks do not charge a fee for this service. However, if at some point they do begin such service fees, those fees will be charged to you, the customer, on your monthly utility bill.