



TOWNSHIP of MORRIS NEW JERSEY

AUTHORIZATION AGREEMENT FOR ACH DIRECT WITHDRAWALS

Check one or all that apply: _____ Tax _____ Sewer

I hereby authorize the Township of Morris, to initiate debit entries to my (our) checking account indicated below and I hereby authorize the depository named below, hereinafter called DEPOSITORY, to debit the same to such account. I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of US law. All ACH debits will be withdrawn from the accounts on the due date of the bill. _____ Initial

| | |
|------------------|--|
| Depository Name: | |
| Branch: | |
| City/State/Zip: | |
| Routing Number | |
| Account Number | |

This authorization is to remain in full force and effect until the Township of Morris has received **written notification** of termination a minimum of thirty days prior to the next withdrawal. If any debit entry is denied by the above named depository for non-sufficient funds, your account will be charged a fee of \$20.00.

| | |
|-------------|---------------|
| Date: | Phone Number: |
| E-mail: | |
| Print Name: | |
| Signature: | |

ATTACH A VOID CHECK TO FORM

| | | |
|----------|-----|------------------|
| Block | Lot | Sewer Account #: |
| Address: | | |