*** Clarke Utilities***

East Pointe Building

 223 Hwy. 70 East, Suite 115

 Garner, NC 27529

 Email: joel@clarkeutilities.com

***AUTHORIZATION FOR AUTOMATIC BANK DRAFT***

***DATE OF AUTHORIZATION:*** Click or tap to enter a date.

I authorize Clarke Utilities, INC. to initiate electronic debit entries to my:Choose an item.

I ACKNOWLEDGE THAT THE ORIGINATION OF THE ACH TRANSACTIONS TO MY ACCOUNT MUST COMPLY WITH THE PROVISIONS OF US LAW. THIS AUTHORITY WILL REMAIN IN EFFECT UNTIL I HAVE CANCELLED IT IN WRITING.

**CUSTOMER INFORMATION**

Name: Click or tap here to enter text.

Utility Account Number: Click or tap here to enter text.

Phone Number on Account: Click or tap here to enter text.

EMAIL Address: Click or tap here to enter text.

**FINANCIAL INSTITUTION INFORMATION**

Financial Institution Name: Click or tap here to enter text.

Financial Institution Address: Click or tap here to enter text.

Account Number at Financial Institution: Click or tap here to enter text.

Routing Number at Financial Institution: Click or tap here to enter text.

**DELIVERY OPTIONS: Print Completed Form and Submit as Below:**

[ ] EMAIL: A SCANNED COPY OF A VOIDED CHECK MUST ACCOMPANY THIS AUTHORIZATION

[ ] MAILING: A VOIDED CHECK MUST ACCOMPANY THIS AUTHORIZATION

**CUSTOMER SIGNATURE:** Click or tap here to enter text.