

DIAMONDHEAD FIRE PROTECTION DISTRICT

4440 KALANI DRIVE, DIAMONDHEAD MS 39525

AUTHORIZATION AGREEMENT FOR ACH TRANSACTIONS

I (we) hereby authorize the Diamondhead Fire Protection District to deduct from my checking or savings account, the payment due each month. It will not be necessary for Diamondhead Fire Protection District or anyone employed by it to sign transfers or checks. I agree that the bank's rights in respect to such transfer must be under no obligation to furnish me with special advice or notice in writing or otherwise of the presentment of any such transfer or the charging of the amount to my account. This authorization is to remain in effect until revoked by me in writing, and until you actually receive such notice, I agree that you shall be fully protected in honoring any such transfers. I understand if a draft is returned for any reason (such as: insufficient funds & account closed), I will be charged the District's current returned draft fee.

I understand my account will be charged on the **15th** day of each month by DIAMONDHEAD FIRE PROTECTION DISTRICT. If the 15th falls on a holiday or weekend, the transaction will take place the next business day.

Name on Fire District Account: _____

Fire District Account Number: _____

Service Address of Property: _____

Mailing Address: _____

Phone: _____, _____

Email: _____

Alt Email: _____

Name as shown on Bank Account: _____

Depository / Bank Name: _____

Transit / ABA / Routing Number: _____

Bank Account Number: _____

START DATE FOR ACH (The ACH will become effective on the next billing cycle after submission of a completed form with bank documentation) : _____

SIGNED: _____ DATE: _____

*****PLEASE ATTACH A VOIDED CHECK*****

If no check is available, please provide documentation from your financial institution proving ownership of the account to be used for the ACH draft. This documentation must include name, routing number, and account number.

Note: The DFPD account must be at a zero balance to start ACH direct debit.