

**DIRECT DEBIT OF WATER AND SEWERAGE AUTHORIZATION FORM**

I (we) hereby authorize Clearfield Municipal Authority (THE COMPANY) to initiate entries to my checking or savings account through CNB Bank (THE FINANCIAL INSTITUTION), and if necessary, initiate adjustments for any transactions credited/debited in error. This authority will remain in effect until THE COMPANY is notified by me (us) in writing to cancel it in such time as to afford THE COMPANY and THE FINANCIAL INSTITUTION a reasonable opportunity to act on it.

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CUSTOMER(S) NAME(S) - PLEASE PRINT

I would like my utility charges directly debited from the following account at the following institution:

Checking / Savings Account Number \_\_\_\_\_

Financial Institution Name \_\_\_\_\_

Routing Number \_\_\_\_\_

**\*\*\* ATTACH A VOIDED CHECK OR A DEPOSIT SLIP \*\*\***

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CUSTOMER(S) NAME(S)

DATE

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CMA ACCOUNT NUMBER(S)