

## ASHLAND DISPOSAL AUTOPAY

Convenient | Confidential | Accurate

For your convenience, Ashland Disposal can withdraw your monthly fee automatically from your bank checking account with an Autopay (Electronic Funds Transfer) Authorization.

### *Simply...*

- Mail this completed form with a voided check and payment for your current invoice.
- We will enroll you in Autopay and withdraw your monthly fee automatically, starting with your next invoice.

Funds are withdrawn on the 25<sup>th</sup> of each month for the current month's regular services. If the 25<sup>th</sup> falls on a weekend or banking holiday, the funds will be withdrawn on the next business day. Feel free to contact us with any questions.

### ASHLAND DISPOSAL SERVICE

PO Box 235

Ashland, NE 68003

402.944.3950

rick@ashlanddisposal.com

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### AUTHORIZATION AGREEMENT FOR ASHLAND DISPOSAL MONTHLY FEE AUTOPAY

I (we) authorize and request ASHLAND DISPOSAL to initiate electronic debit entries to charge my (our) account indicated below in the financial institution named below (BANK). I (we) authorize and request our BANK to honor the debit entries initiated by ASHLAND DISPOSAL and debit these charges to that account. This authorization relates to the monthly payments required for refuse removal by ASHLAND DISPOSAL. This authorization will remain in effect until all amounts owed related to monthly service contract are paid in full, or until (we) cancel this authorization. To cancel, I (we) must notify ASHLAND DISPOSAL in writing in advance to give ASHLAND DISPOSAL a reasonable opportunity to act.

CUSTOMER NAME \_\_\_\_\_ CUSTOMER # \_\_\_\_\_

BANK NAME \_\_\_\_\_ ABA ROUTING # \_\_\_\_\_

PLEASE CIRCLE ONE: CHECKING or SAVINGS ACCOUNT # \_\_\_\_\_

DEDUCTION AMOUNT \$ \_\_\_\_\_ START DATE \_\_\_\_\_

SIGNATURE(S) \_\_\_\_\_ DATE \_\_\_\_\_

*Please attach a voided check to Ashland Disposal Autopay Authorization.*