# CHARTER TOWNSHIP OF MADISON

**Gary Griewahn**
Supervisor
**Terry Etter**
Clerk
**Harold Gregg**
Treasurer

**4008 S. ADRIAN HIGHWAY**
**ADRIAN, MI 49221**
**517-263-9313 Fax 517-263-4569**

**Trustees**
Howard Bales
Matt Carpenter
Larry Liedel
Ralph Benschoter

**AUTHORIZATION AGREEMENT FOR AUTOMATIC UTILITY PAYMENTS**
**(ACH CREDITS AND DEBITS)**

___ New ACH Date: _____

___ Change ACH

___ Cancel ACH

I hereby authorize First Federal Bank acting for Madison Charter Township to Electronically Debit my (our) checking ( ) or savings ( ) account for my Utility Billing each month. Adjusting errors are also authorized. It is agreed that these transactions will be made electronically under the rules of the National Automated Clearing House Association. Authorization will remain in effect as dated or until we receive a written notice canceling such authorization or if funds become unavailable due to insufficient funds.

Bank Code: _____ Bank Name: _____

Bank Address: _____ City: _____ State: _____ Zip: _____

Bank Route #: _____

Customer Name: _____ Phone: _____

_____

(Print or Type)

Customer Acct: #_____ Checking ( ) Savings ( )

Customer Address: _____ City:_____ State:_____ Zip:_____

Authorized Signature(s): _____

_____