



Brownsville Energy Authority  
25 N. Lafayette Brownsville, TN 38012  
(731) 772-8845

## Debit Authorization Form

I (we) hereby authorize Brownsville Energy Authority, to initiate electronic debit entries on my (our) account indicated below and the Financial Institution, named below, to debit the same to such account for payment for utility services. I (we) acknowledge that ACH transactions I (we) authorize must comply with all applicable laws, including U.S. law/ In the event of an erroneous or duplicate entry, I hereby authorize Brownsville Energy Authority to credit my account indicated below to correct any error made.

\_\_\_\_\_  
(Customer Name)

\_\_\_\_\_  
(Account Number)

\_\_\_\_\_  
(Service Address)

\_\_\_\_\_  
(Financial Institution)

\_\_\_\_\_  
(Branch)

\_\_\_\_\_  
(Financial Institution Address)

\_\_\_\_\_  
(Financial Institution City/State/Zip)

Routing Number: \_\_\_\_\_ Account Number: \_\_\_\_\_

Type of Account:    Checking     Savings

Monthly account balance on the due date

(Amount of the debit or method of determining amount of the debit)

Frequency (Weekly, Monthly, etc.): Monthly    Start Date (if recurring): \_\_\_\_\_

Date of Debit(s): Statement Due Date

***\*If the debit is recurring and the date of the debit falls on a non-banking day, the debit may post to your account on the next banking day and will not post to your account prior to the authorized date.***

(**Note:** For varying amounts the company must send, based on NACHA Operating Rules, written notification of the amount and the date on or after which the transfer will be debited at least ten calendar days in advance of the debit. If the date varies, the Rules state that the Originator must send the Receiver notification of the new date at least seven calendar days in advance of the debit.)

This authorization is to remain in full force and effect until Brownsville Energy Authority has received written notification from me (or either of us) of its termination in such time and manner as to afford Brownsville Energy Authority a reasonable opportunity to act on it.

\_\_\_\_\_  
Print or Type Individual Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date