AUTOMATIC BANK DRAFT PROGRAM

AUTHORIZATION AGREEMENT DIRECT PAYMENTS (ACH DEBITS)

I (we) hereby authorize **MOUNTAIN SPRINGS WATER SUPPLY CORP**., hereinafter called COMPANY, to debit entries to my (our) account indicated below and the Financial Institution named below, hereinafter called FINANCIAL INSTITUTION, and to credit the same to such account. I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of U.S. law.

(Financial Institution Name)		(Branch)
(Address)	(City, State)	(Zip)
(Routing Number)	(Account Number)	Type of Acct: Checking Savings
Mountain Springs Water Supp	ly account number(s):	
1	2	3
4	5	6

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

Only amounts due on account(s) listed above will be debited from the indicated bank account. It will be the member's responsibility to notify the COMPANY by submitting a new form should they decide to include additional accounts.

ACH transactions that fail due to insufficient funds, closed account, etc. will be subject to a \$25.00 fee.

Application must be received in the office prior to the 1st of the month for consideration the next billing period.

Activated accounts will display the message "BANK DRAFT DO NOT PAY" on their monthly billing statement. Once activated, the draft will occur on or about the 10th of each month, excluding weekends and holidays, for the amount of the monthly water bill.

(Print Individual Name)

(Print Individual Name)

(Signature)

(Signature)

(Date)

PLEASE ATTACH A VOIDED CHECK TO THIS FORM

Mail, drop off, or email completed form to:

Mountain Springs Water Supply Corporation 7131 E. FM 922 P.O. Box 219 Valley View, TX 76272 marlawater@ntin.net