

Woodbine Special Utility District

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Gainesville, TX 76241
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www.woodbinewater.com
service@woodbinewater.com



EST. 1968

Authorization to Change ACH Debit

Name: _____

Address: _____

Phone #: _____

Woodbine S.U.D. Acct. #'s: _____

I, _____, hereby authorize Woodbine Special Utility District, Woodbine, TX, to change the bank account that my monthly ACH Debit comes out of. This authorization will remain in force until Woodbine S.U.D. receives written notice from me and has reasonable time to act upon it.

Signature

Date

Old Bank: _____

New Bank: _____

Bank Address: _____

Bank Account: _____

Bank ACH Routing #: _____

Checking Account _____ Savings Account _____

Personal Account _____ Business Account _____

ATTACH VOIDED CHECK HERE