WHITE OAK SANITATION & RECYCLING

White Oak Sanitation

P.O. Box 1736

Gainesville, GA 30503

P: 706-367-0628

AUTHORIZATION AGREEMENT FOR PREAUTHORIZED PAYMENTS

I hereby authorize White Oak Sanitation to initiate a debit entry to my checking account indicated below at the depository named below to debit the same such account. I am aware that my checking account will be debited any time between the 1st through the 5th of the month due.

Depository Name_____

Branch_____

City_____

State_____Zip_____

Routing Number_____

Account Name_____

Account Number_____

This authorization is to remain in full effect until White Oak Sanitation has received written notification from me of its termination in such time and in such a manner to afford reasonable time to act upon it.

Customer Signature_____

White Oak Account #_____

Date_____

PLEASE ATTACH A VOIDED CHECK TO THIS FORM!!!