

AUTOMATIC BANK DRAFT AGREEMENT

HORN LAKE WATER ASSOCIATION 1543 DANCY BLVD., P.O. BOX 151 HORN LAKE, MS 38637

Credit / Debit Authorization Form

I (we) hereby authorize Horn Lake Water Association to initiate entries to my checking account at the financial institute listed below. This authority will remain in effect until HLWA is notified by me (us) to cancel it in such time as afforded Horn Lake Water Association and my bank a reasonable opportunity to act on it. However, I understand that if any draft on my account is returned as INSUFFICIENT, my draft privileges can/ will be suspended until my account with Horn Lake Water Association is brought current.

Please Print:	•
(Name)	(HLWA Acct#)
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(Address)	
(Name of Financial Institution, Bank)	
	(Checking / Savings Account Number)
(Financial Institution/ Bank Routing Number) .	(CHECKING) SEVINGS HOUSE WEIGHT
(Signature)	(Date)