

Authorization for Johnson Utilities, L.L.C. Automatic Payment (EFT) and Credit Card Payment

I (we) authorize Johnson Utilities, L.L.C. to initiate debit entries (EFT – Electronic Funds Transfer) to my (our):

Checking Account – include a voided check

BANK NAME _____ BANK ADDRESS _____
CITY _____ STATE _____ ZIP _____
ROUTING NUMBER _____ ACCOUNT NO. _____

This authorized account will be billed each month on the due date with no additional fees. I understand non-payment due to insufficient funds in my (our) account will be processed by my financial institution and Johnson Utilities, L.L.C. in the manner as an insufficient funds check and that I may be charged an insufficient funds processing fee by both.



I (we) understand that this authorization will be for the total amount due each month. This authorization is to remain in force until Johnson Utilities, L.L.C. has received written notification by me (or either of us) of its termination in such time and in such manner as to afford Johnson Utilities, L.L.C. and the financial institution a reasonable opportunity to act on it.

NAMES(S) (Please Print) _____ DATE _____

SIGNATURE _____ SIGNATURE _____

Johnson Utilities account # _____

You can mail this form to Johnson Utilities (968 E Hunt Highway, Queen Creek, AZ 85143), fax it to us at (480) 987-9819, or bring it to the office.