



**Direct Payments  
(ACH Debits)**

**Authorization Form**

Highlands Union Bank  
Attn: Bookkeeping  
266 NW Valley Street  
Abingdon, VA 24210  
FAX: (276) 619-5959

**Account Holder**

<b>First Name</b>	<b>Middle Initial</b>	<b>Last Name</b>
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**Account Information**

**Financial Institution Name**

<b>Account Number</b>	<b>Branch</b>	<b>Routing Number</b>
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<b>Type of Account</b>	<b>Branch Address</b>			
<input type="checkbox"/> <b>Checking</b>	<b>Street</b>	<b>City</b>	<b>State</b>	<b>Zip Code</b>
<input type="checkbox"/> <b>Savings</b>				

**Authorization**

I (we) hereby authorize Town of Beech Mountain, NC, hereinafter called COMPANY, to debit entries to my (our) account indicated above and Highlands Union Bank, hereinafter called FINANCIAL INSTITUTION, to debit same to such account. I (we) acknowledge the origination of ACH transactions to my (our) account must comply with the provisions of U.S. law. 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.

<b>Customer Signature</b>	<b>Date</b>
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<b>Print Individual's Name</b>	<b>SSN</b>
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<b>Customer Signature</b>	<b>Date</b>
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<b>Print Individual's Name</b>	<b>SSN</b>
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**PLEASE ATTACH COPY OF VOIDED CHECK TO THIS FORM NOT A DEPOSIT SLIP!**

**For Internal Use Only**

**HUB Account to Credit:**

<b>HUB Employee Name:</b>	<b>Branch:</b>
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PLEASE MAIL TO: BEECH MOUNTAIN UTILITIES  
403 BEECH MOUNTAIN PARKWAY  
BEECH MOUNTAIN, NC 28604  
OR FAX TO: 828-387-4862 ATTN: JESSICA