



**AUTHORIZATION FORM**

\_\_\_\_\_ (date)

The execution of this form authorizes McMinn Waste Removal to draft our/my:

Type of account: \_\_\_checking\_\_\_savings

Account number: \_\_\_\_\_

Bank Name: \_\_\_\_\_

Routing or ABA # \_\_\_\_\_

Frequency of draft: Monthly/Quarterly

Amount of draft \$ \_\_\_\_\_

This authorization shall begin on \_\_\_\_\_ (date) and remain in effect until revoked in writing.

\_\_\_\_\_  
Account Holder Signature

\_\_\_\_\_  
Print Name