

**AUTHORIZATION TO PAY WATER/SEWER BILL  
BANK DRAFT  
(ACH DEBIT)**

Return this form to:  
Total Environmental Solutions, Inc. P.O. Box 14059 Baton Rouge LA. 70898  
Fax # 225-766-4470

***Please send a VOIDED check with the Application  
(No Temp Checks Will Be Accepted and this will delay processing)***

I (we) authorize Total Environmental Solutions, Inc. to start debit entries to my/our  
( ) **Checking** ( ) **Savings account (select one)** at the financial institution named below  
and to debit my account accordingly.

Financial Institution \_\_\_\_\_ Branch \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Account No.** \_\_\_\_\_

This authorization is to remain in effect until Total Environmental Solutions, Inc. has received a **30 day written notification** from me (or either of us) of its **termination and/or change in bank information** in time to allow Total Environmental Solutions, Inc. and the Financial Institution a reasonable opportunity to act on it.

Account Name \_\_\_\_\_

Please Print

Total Environmental Solutions, Inc. Acct. # \_\_\_\_\_

Date \_\_\_\_\_ Signed \_\_\_\_\_

Date \_\_\_\_\_ Signed \_\_\_\_\_

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Telephone #(     ) \_\_\_\_\_ (h)

(     ) \_\_\_\_\_ (w)

(     ) \_\_\_\_\_ (c)