



# AUTOMATIC WITHDRAWAL AUTHORIZATION

## Purpose of Authorization: (check one)

New Authorization  
(complete A, B, C and F)

Change to Existing Authorization  
(complete A, B, D and F)

Cancellation  
(complete A and E)

## A. Customer Information

Customer's Name (please print)

Account Number

Address

City, State, Zip

## B. Banking/Financial Institution Information

Name of Bank/Financial Institution

Phone Number of Institution

Address

Account Number

Address

Bank ABA/Routing #

Address

Checking     Saving

## C. New Authorization Statement

I authorize and request Acme Fuel Co. to instruct my financial to make payments in the amount owing to Acme Fuel Co. I also understand I may discontinue this authorization at any time by giving written notice to Acme Fuel Co. I realize this information will be used solely for the purpose of consumer withdrawal.

Customer's Signature

Date

## D. Change Authorization Statement

I authorize and request Acme Fuel Co. to make the changes indicated on this form for automatic withdrawal for payment to my account.

Customer's Signature

Date

## E. Cancellation Statement

I request Acme Fuel Co. to terminate my authorized automatic withdrawal for payment to my account. I will allow a reasonable time for Acme Fuel Co. to act upon my request to terminate this agreement.

Customer's Signature

Date

## F. Attach a voided check