

NAME (Please print) \_\_\_\_\_

ADDRESS \_\_\_\_\_

AGRALITE ACCOUNT NO. \_\_\_\_\_

SSN \_\_\_\_\_ PHONE \_\_\_\_\_

Financial Institution: \_\_\_\_\_  
(Name/ City/ State/ Zip)

CHECKING ACCOUNT NO. \_\_\_\_\_

I authorize Agralite Electric Cooperative and the financial institution named above to initiate variable entries to my checking account. This authority will remain in effect until Agralite receives written notification from me. I understand that meter readings are still necessary.

SIGNATURE

\_\_\_\_\_

**(Please include a voided check with your application)**