



**AUTHORIZATION AGREEMENT FOR PRE-AUTHORIZED PAYMENTS**

I (we) hereby authorize **Leahy's Fuels Inc.** to initiate debit entries and to initiate, if necessary, credit entries and adjustments for any debit entries made in error to my (our)

**Checking Account ( )**

**Savings Account ( )**

at the financial institution named below and authorize that institution to debit and/or credit the same to such account. ACH payments will be automatically processed on approximately the 10<sup>th</sup> of each month. This monthly draft will include any service performed or equipment installment payments that are not included in your budget plan.

**BANK NAME** \_\_\_\_\_

**ACCOUNT NAME** \_\_\_\_\_

**BANK ROUTING NUMBER** \_\_\_\_\_

**ACCOUNT NUMBER** \_\_\_\_\_

This authorization is to remain in full force and effect until Leahy's Fuels Inc. has received written notification from me (or either of us) of its termination in such time and in such manner as to afford you and my financial institution a reasonable opportunity to act on it.

**NAME** \_\_\_\_\_ **SIGNED** \_\_\_\_\_ **DATE** \_\_\_\_\_  
(Please Print)

**NAME** \_\_\_\_\_ **SIGNED** \_\_\_\_\_ **DATE** \_\_\_\_\_  
(Please Print)

**PLEASE ATTACH A VOIDED CHECK**

**PLEASE MAIL COMPLETED FORM AND ATTACHED VOIDED CHECK TO:**

**LEAHY'S FUELS, INC.  
P.O. BOX 130  
DANBURY, CT 06813-0130**