



225 North Main Street
Celina, OH 45822
419-586-2311

Credit Card Authorization Agreement

Sign and complete this form to authorize **Celina Utilities** to debit your credit card listed below. By signing this form you give us permission to debit your account for utilities billed to your account.

Please complete the information below:

I _____ authorize **Celina Utilities** to charge my credit card
(full name)
account indicated below for utility services for account number _____
(Account number)
in reference to _____
(Service address)

Billing Address _____ Phone# _____
City, State, Zip _____ Email _____

| |
|---|
| Account Type: <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard |
| Cardholder Name _____ |
| Account Number _____ |
| Expiration Date _____ |
| CVV2 (3 digit number on back of Visa/MC) _____ |

SIGNATURE _____ DATE _____

I hereby authorize Celina Utilities to initiate credit entries and to initiate, if necessary, debit entries and adjustments for any credit entries in error to my credit card indicated above. The credit entries will be made on the last working day of each month.

This authority is to remain in effect until the Celina Utilities Office has received written notification from me to terminate this agreement.