



Waste & Recycling Services

AUTO DEBIT AUTHORIZATION FORM

Place Voided Check or
Savings Account Withdrawal Slip
HERE

You choose the account and Rumpke deducts your payment and mails you a statement for your records. To take advantage of this added convenience, simply take a few moments to complete this form (Please Print) and send it with a voided check or savings withdrawal slip to:

Rumpke of Ohio
Accounts Receivable
10795 Hughes Rd.
Cincinnati, OH 45251

Name on Your Account: _____

Rumpke Customer Number _____

Service Address: _____ ZIP Code: _____

Phone Number: (_____) _____ Checking Account _____ or Savings Account _____

Auto Debit Authorization Form

I hereby make Rumpke the authorized check signer on the financial institution account identified above. I authorize Rumpke to perform scheduled or periodic electronic debits and/or credits from the account identified above for payment due.

In the event that a debit is returned, Rumpke reserves the right to collect a \$20 processing fee from the account specified above.

This authorization may be withdrawn by the customer effective upon receipt of written notification at the above address.

I understand and authorize all of the above as evidenced by my signature below.

Authorization Signature: _____ Date: _____