



FLORIDA KEYS ELECTRIC COOPERATIVE ASSOCIATION, INC.
 PO BOX 377 TAVERNIER, FL 33070
 (305) 852-2431 (800) 858-8845

ELECTRONIC FUNDS TRANSFER AUTHORIZATION FORM

****PLEASE ATTACH A VOIDED CHECK FOR BANK ACCOUNT VERIFICATION****

I. NAME AS LISTED ON YOUR FKEC ACCOUNT: _____

 PHONE NUMBER AT SERVICE LOCATION: _____
 ALTERNATE PHONE NUMBER: _____

II. ELECTRONIC FUNDS TRANSFER AUTHORIZATION IS FOR:

ALL ACCOUNTS	ACCOUNT(S) LISTED BELOW: _____ _____ _____ _____ _____
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III. AUTHORIZATION AGREEMENT FOR ELECTRONIC FUNDS TRANSFER

I (we) authorize Florida Keys Electric Cooperative Association, Inc., hereinafter called FKEC, to initiate debit entries and to initiate, if necessary, credit entries and adjustments for any debits in error to my (our) ___ checking, ___ savings account (select one) indicated below and the depository named below, hereinafter called Financial Institution, to debit and/or credit the same to such amount.

I further agree that if such check be dishonored, whether with or without cause, you shall be under no liability whatsoever, even though such dishonor results in the disconnection of electric service.

This authorization is to remain in effect until revoked by me (us) in writing, or until you actually receive such notice, I agree that you shall be fully protected in drawing any such debit or credit. I understand that if any such debit be dishonored by my Financial Institution and any amount due FKEC is not paid in accordance with the terms of Policy Bulletin 209.0, that electric service to my (our) account(s) may be subject to disconnection.

DATE: _____ AUTHORIZED SIGNATURE: _____

****DON'T FORGET TO ENCLOSE YOUR VOIDED CHECK****

THIS SECTION FOR OFFICE USE ONLY			
BANK NAME:	_____		
BANK ID #:	_____		
BANK ROUTING #:	_____		
NAME ON BANK ACCOUNT:	_____		
BANK ACCOUNT #:	_____		
PRENOTE:	YES	NO	CYCLE#: _____ INVOICE #: _____