

TECO Automatic Payment Agreement

NAME ADDRESS CITY, STATE ZIP		0123 01-23456789
DATE _____		
PAY TO THE ORDER OF _____		\$ <input type="text"/>
BANK NAME ADDRESS CITY, STATE ZIP		DOLLARS
FOR _____		
⑆012345678⑆	01234567890123⑆	0123
Bank Routing Number	Bank Account Number	Check Number

AUTHORIZATION AGREEMENT FOR DIRECT PAYMENTS (ACH DEBITS) AND STORAGE OF BANK INFORMATION

By signing below, you agree to the bank account payment method storage terms & conditions and would like the below payment method stored for use in e-Bill & you authorize Tampa Electric Company to initiate debit entries as specified by you from time to time, for the amount(s) specified, to the checking or savings account(s) you indicate, at the depository financial institution(s) you indicate, and to debit such specified amount(s) to such checking or savings account(s). You agree that the origination of ACH transactions to your checking or savings account(s) must comply with the laws of the United States of America.

You represent and warrant that you are legally authorized to use the bank account(s) that you have entered on Tampa Electric Company e-Bill service and authorize Tampa Electric Company to store that banking information on this service.

You agree that this authorization will remain in full force and effect until Tampa Electric Company has received notification from you of its termination in such time and in such manner as to afford Tampa Electric Company and the financial institution a reasonable opportunity to act on it.

Bank Name: _____ **Bank Account Type:** ☐ Checking ☐ Savings (check one)

Bank Account Holder Name: _____

Routing Number: _____ **Account Number:** _____

Print Name

Sign Name

Date