

## ONE TIME PAYMENTAUTHORIZATION

Customer Name:	
Telephone Number:	_ Fax Number:
Email Address:	
Customer Address:	

Customer hereby authorizes Parman Energy Group, and any of its divisions, to debit customer's bank account, indicated below, for the purpose of a one time payment. This authorization must include the name, contact and billing information, the amount of the transaction, the effective date of the transaction and the customer's submitted agreement for a single-entry ACH debit. Authorization of this transaction is conveyed by submission of this form electronically.

Account Type: Checking \_\_\_\_\_\_ Savings: \_\_\_\_\_

Routing No.:\_\_\_\_\_ Account No.:\_\_\_\_

Amount:\_\_\_\_\_ Payment

Date:\_\_\_\_\_