USA Hauling & Recycling, Inc. Auto Pay Enrollment Form

Account #:		
Customer Name		
Service Address		
Mailing Address		
Telephone	E-mail Address	
I authorize USA Hauling & Recycling, Inc. to credit card network named below to transfer p Hauling & Recycling, Inc. from my:		
Mastercard Visa A	American Express	
Account Number:	Exp Date:	CVV2:
Name as it appears on the card:		
Note: CVV2 code is o	on the back of M/C and Visa or on the front	t of Amex
Checking Account		
Name on the account:		
Name of bank or financial institution:		
Routing Number:		
Account Number:	** Please enclo	se a voided blank check **
Authorized signature(s)		Date