

**NATIONAL GRID USA  
ACH PAYMENT AUTHORIZATION FORM**

**Must be a *checking* account for ACH transactions (electronic deposit )  
Payment format will be CTX unless otherwise indicated**

Company or Individual Name (required)  Address, City, State, Zip code ( required)	Taxpayer Identification Number (Social Security Number or Company EIN ) Required
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Email Address(es) for Payment Remittance Info	Purpose of this Form <input type="checkbox"/> New ACH <input type="checkbox"/> Change ACH Acct
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Receivable Contact Person  Receivable contact E-mail Address:	Telephone Number   Fax Number
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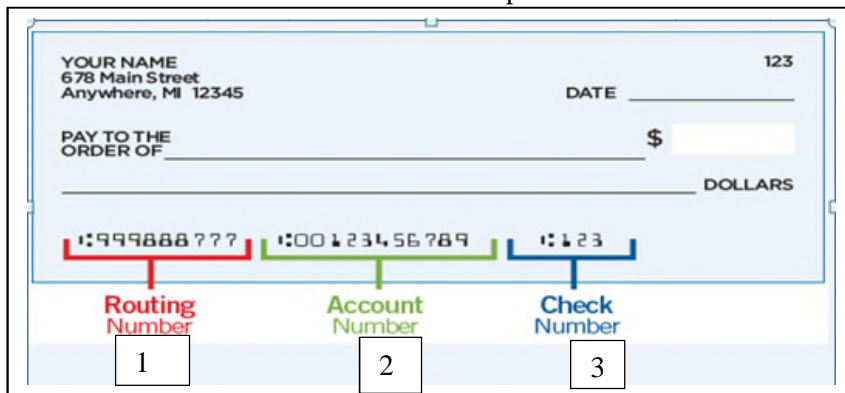
Bank Name	Effective Date
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Bank Address, City, State, Zip code
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Routing Number – see example 1
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Bank Account Number –see example 2 ( Do not include check number- example 3)
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Example



**Authorization**

I hereby authorize National Grid, to initiate credit entries to the account specified on this form in accordance with the applicable rules relating to corporate payment entries of the National Automated Clearing House Association (NACHA) and its related member associations. This authorization is to remain in full force and effect until National Grid has received written notification from the vendor of its termination. National Grid reserves the right to terminate this agreement at its discretion.

Date	Authorized Signature	Title
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