



SANDSTONE CENTRE
— *Truck Wash* —

Sandstone Centre

ELECTRONIC FUNDS TRANSFER AUTHORIZATION

Company Name: _____

Names On Account: _____

Address: _____

City: _____

Postal Code: _____

Phone Number: _____ Cell: _____

Fax Number: _____

BANK INFORMATION: (Must attach a copy of a void cheque.)

Name of Financial Institution: _____

Bank I.D.: _____

Branch I.D.: _____

Account Number: _____

**I HEREBY AUTHORIZE GATEWAY INDUSTRIAL PARK TO WITHDRAW
PAYMENT FROM MY ACCOUNT UNTIL FURTHER NOTICE.**

Date: _____ Authorized Signature: _____