

PO Box 716 3810 North Highway 281 Mineral Wells, TX 76068 (940)327-0700 www.northruralwsc.com

## **BANK DRAFT (ACH) AUTHORIZATION FORM**

I, \_\_\_\_\_\_, am the owner/authorized agent of the bank account listed below and do hereby authorize North Rural Water Supply Corporation, hereinafter referred to as CORPORATION, through its financial institution, to implement a direct payment procedure for water service fees and any other applicable charges, through ACH (Automated Clearing House) debit entries initiated by the CORPORATION to be debited against the bank account indicated below. Such ACH debit entries shall be made on a monthly basis and in lieu of the physical mailing of the customer's payment.

Bank Account Information: (check one)	Checking Account Savings Account
Name of Bank:	Branch:
Routing #:	Account #:

Water Service Account: Account No	
Name on Account:	Maximum Monthly Draft Amount: \$
Contact Information: Cell:	Email:
Check here if you would like to receive an email fol	lowing each drafted payment.

You will continue to receive your water bill each month. A message will appear on your monthly statement stating "TO BE PAID BY AUTOMATIC DRAFT". Once this message appears on your statement, your water bill will be drafted on the 15<sup>th</sup> each month; If the 15<sup>th</sup> falls on a weekend or holiday it will be drafted on the next business day.

## Authorization:

Name: (please print) \_\_\_\_\_

Date:			

## Signature:

**Termination:** This authorization is to remain in full force and effect until the CORPORATION has received written notice of termination. Written notice may be sent by mail, email or fax and must be received 3 business days before the next scheduled draft date.

ATTACH VOIDED CHECK HERE

Office Use Only

Account No. \_\_\_\_ Entered by: \_\_\_\_ Received: \_\_ / \_\_ / \_\_\_ First draft \_\_ / \_\_ / \_\_\_