



Account Draft Request

Name(s)

Mailing Address

City/State/Zip

Please begin drafting my bank account for my monthly water bill. I (we) understand that the draft will normally be debited from the account within two days of my water bill due date. I (we) understand that this authorization will remain in full force and effect until I (we) notify the Authority that I (we) wish to revoke this authorization. Notice of revocation must be given at least 1 day in advance of the effective termination date.

I (we) authorize Butts County, et al. Water & Sewer Authority to electronically debit my (our) account (and, if necessary, electronically credit my (our) account to correct erroneous debits) as follows:

Service Location _____

Authority Account Number _____

Bank Name _____

Bank Account Number _____ Bank Routing Number _____

This is a checking account savings account (check one)

signature (s)

date

Note: The Authority must get a copy of one of your checks to complete the set-up of the draft. If mailing, e-mailing, or faxing this form, please attach a check copy.