



Authorization Agreement for Pre-Authorized Debits(Bank Draft)

I (we) hereby authorize South Granville Water and Sewer Authority hereinafter called SGWASA, to initiate debit/credit entries to my (our) Checking account indicated below and the financial institution named below to debit the same to such account.

Financial Institution _____

City _____ State _____ Zip Code _____

Bank Transit Number/ABA Number _____ Account Number _____

This authority is to remain in full force and effect until SGWASA has received written notification from me (or either of us) of its termination in such time and in such manner as to afford SGWASA a reasonable opportunity to act on it.

Name Social Security/ID Number

Name Social Security/ID Number

X _____ X _____
Signature Date Signature Date

NOTES:

1. Please attach a voided check to ensure that we setup your account properly.
2. Drafts will occur on the 5th of each month. Please ensure that funds are available. Please be aware that your draft could be rejected by your financial institution due to insufficient funds, changes in your accounts, or other reasons beyond the control of SGWASA. You should notify us of any changes in your account information immediately.
3. A draft rejection is treated internally by SGWASA as a returned check, and therefore incurs a **\$25** fee. You will be notified by SGWASA via mail if your draft is rejected. You are responsible for paying your bill, including the \$25 fee, before the date specified in that notification to avoid interruption or termination of services. Also note that per SGWASA return check policy, you will be put on “cash payment” requiring future payments to be made in cash/money order. This will prevent you from payments of check or draft.
4. There is normally a one or two billing cycle delay in drafting your account due to a prenote process. Your bill will state that the amount will be **drafted** once this prenote process is completed. Until your bill specifies a draft date, you will need to pay by check, cash, or money order.
5. To end payment by draft, you must submit a signed form to our office **before the 15th of the month**. Any requests received after the 15th will not take effect for current billings and will not become effective until the bills are processed for the following month.

SGWASA use only :	Processed: by _____ date _____
Account # _____	Reviewed: by _____ date _____