

First draft date _____

WATER ACCOUNT # _____

BANK DRAFTS ARE SUBMITTED ON THE 5th OF THE MONTH.

(If the 5th is on the weekend or holiday the draft will be submitted the next working day.)

**GRAND PRAIRIE BAYOU TWO P.W.A.
AUTOMATIC BANK DRAFT AUTHORIZATION**

NAME: _____
(As it appears on your Grand Prairie Bayou Two P.W.A. statement)

Address: _____

City: _____ State: _____ Zip Code: _____

Home/Cell Phone: _____

E-Mail Address: _____

PLEASE MARK ONE: _____ I WANT A PAPER BILL & E-MAIL

_____ NO, I DO NOT WANT A PAPER BILL (E-MAIL ONLY)

GRAND PRAIRIE BAYOU TWO WATER ACCOUNT NUMBERS TO BE PAID BY DRAFT:

NAME OF YOUR FINANCIAL INSTITUTION: _____

City: _____ State: _____ Zip Code: _____

Name: _____

(As it appears on your bank account)

BANK ROUTING NUMBER: _____

CHECKING OR SAVINGS ACCOUNT NUMBER: _____

I authorize the financial institution named above to pay my monthly Grand Prairie Bayou Two P.W.A. water bill and to deduct each payment from my checking/savings account. This authority is to remain in effect until revoked by me in writing. I agree that each payment shall be the same as a check personally signed by me. I have the right to stop payment of a charge by timely notification to my financial institution and Grand Prairie Bayou Two P.W.A. reserves the right to terminate this draft service (or my participation therein).

SIGNATURE: _____ DATE: _____

Please include this form with your payment check, or enclose a voided personal check.

Mail to: Grand Prairie Bayou Two P.W.A. 11177 AR Hwy 31 N. Austin, AR 72007