

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 P.W.A. 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). THE BANK CHARGES .12 cents DRAFT FEE PER MONTH.

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