Yardley Borough Sewer Authority Sewer Account Automatic Cash Transfer ACH Application Form

Name:
Service Address:
Phone Number:
Billing Address:
Sewer Account Number:
Name on Checking Account:
Financial Institution:
I wish to have my payments withdrawn automatically from the following account:
Checking Account (Enclose a voided check.)
Savings Account (Obtain the following from the bank)
Customer's Account Number:
Bank Routing & Transit Number:

Authorization Agreement for Automatic Cash Transfer

I hereby authorize the financial institution I have named on this application to charge the account I have specified for payment on my Yardley Borough Sewer Authority sewer usage bill. I agree that such charge to my account shall be the same as if I had signed a check to pay my bill. I have the right to stop payment of a charge by notifying Yardley Borough Sewer Authority within 15 (fifteen) days of the due date of my bill. If I stop payment 2 (two) times in one year, I will be excluded from this plan. In addition, I understand that both the financial institution and/or Yardley Borough Sewer Authority reserve the right to terminate this payment plan at any time. Also, I may elect to discontinue my enrollment in this plan at any time.

Signature: _____ Date: _____

Return this signed form to:

Yardley Borough Sewer Authority PO Box 404 Yardley, PA 19067-8404

If you should have any questions, please call (215) 493-2045.