

Water Utility Management, LLC.

28 Abercorn Street - Savannah, GA 31401 PO Box 1526 - Savannah, GA 31402 www.WaterGA.com



ACH Bank Draft payment Sign-up Form

CUSTOMER INFORMATION	
Name:	
Customer No:	
E-mail Address:	
Phone No:	
FINANCIAL INFORMATION	
Bank Name:	PAY TO THE ORDER OF
Bank Routing #:	::044072324 ::000123456789 ::123
Bank Account #:	ROUTING ACCOUNT CHECK NUMBER NUMBER NUMBER
Name on Account:	
Account Type (circle one): Checking / Sav	ings
Please be advised: Auto-pay automatically charges your account seven	(7) days prior to the Due Date.
I certify that the information above is correct, that I am an authorized provided for ACH transactions, and that I am authorized to provide the	-
I authorize WATER UTILITY MANAGEMENT, LLC to deduct my account via Electronic Fund Transfer (EFT). I understand sending a VUTILITY MANAGEMENT, LLC will revoke this authorization.	• • •
WATER UTILITY MANAGEMENT, LLC reserves the right to cand due to insufficient funds without notice.	eel recurring Credit Card payments
Print Authorized Name:	
Authorized Signature: D	ate: