



ACH Payment Authorization Form

Schedule your payment of Scott County PSA water/sewer bills to be automatically deducted from your checking or savings account. Just complete this form and return it to our office.

Recurring Payments Will Make Your Life Easier:

- It's convenient (saving you time and postage)
- Your payment is always on time (even if you're out of town), eliminating late charges

Here's How ACH Payments Work:

You will be charged the amount on your water/sewer bill each month. The charge will appear on your bank statement as an "ACH Debit." You agree that no prior-notification will be provided.

Please complete the information below:

I _____ (name) authorize **Scott County PSA** ("PSA") to initiate entries to my checking or savings account at the financial institution listed below, and, if necessary, initiate adjustments for any transactions credited/debited in error. This authorization shall remain in effect until I notify the PSA in writing to cancel it in such time as to afford the PSA and the financial institution a reasonable opportunity to act on the notice. The purpose of this authorization is for payment of the PSA water/sewer bill for the following PSA account:

Customer Name: _____ (the name on the PSA bill)

Account Number: _____ (located on PSA bill)

Billing Address: _____

City, State, Zip: _____

Account Type: Checking Savings

Name on Account _____

Bank Name _____

Bank City/State/Zip _____

Bank Routing Number _____

Account Number _____



Signature _____

Date _____

Please Attach Voided Check Here