

## Bank Draft Authorization

Initial application	Change to	previous application	Cancellation
Requested Cancellation	on Date:		
		perty owner, agree to have the fu withdrawn from your bank acco	
Account No#: Service Address: City: State: Zip Code:			
Account Holder:	Last	First	MI
Phone #:			<u> </u>
Email:			<u> </u>
Draft Termination Da			ount)
Check here if you wo	uld like your bill e	mailed to you each quarter	
If there is more than cadditional sheet.	one account, you m	ay list the other account number	s and service addresses on an
Financial Institution: Phone #: Bank Account #: Bank Routing #:			Checking Savings
Name(s) on Account:	Last	First	MI
	Last	First	MI

## Authorization for Direct Draft:

I authorize the Elizabethtown Borough to initiate automatic drafts from my checking or savings account for the full amount of my quarterly sewer/trash bills. I understand the Elizabethtown Borough will initiate these transactions on the 15th of the month following the bill date. I understand it is my responsibility to notify the Elizabethtown Borough if there is a change in bank account numbers, or if I wish to cancel this authorization by submitting an additional Bank Draft Authorization form indicating the changes. I understand that it may take up to 10 days for this bank draft to take effect(whether new application, change to previous application, or cancellation). I understand that should the bank draft request be returned to Elizabethtown Borough for insufficient funds, the NSF Fee will be added to my utility account and my utility account will be subject to the Late Fee and Delinquent Fee as applicable. Elizabethtown Borough and the financial institution named reserve the right to terminate this payment plan.

Applicant's Signature (Utility Account Holder)	Date			
For Elizabethtown Borough use only  Date Received:	-			
Initial Draft Date:  Draft Termination Date:	(if applicable)			
The financial institution has been notified of this request and is able to set —up and or terminate this draft prior to the dates above.				
Elizabethtown Borough Representative Signature	Date			

A VOIDED CHECK OR DEPOSIT SLIP FOR THE ACCOUNT NAMED ABOVE MAY BE ATTACHED HERE.