

Milford Water Authority  
P.O. Box 149  
Bloomsburg PA 17815-  
Questions? (877)-330-1699



## Automatic Cash Transfer ACH Application Form - Utility Bills

Your utility bill will reflect "Auto-Pay" upon being added to this program.

\*This is an optional, free program of reoccurring payments through your bank account.

Utility Account Number: \_\_\_\_\_



Name: \_\_\_\_\_

Service Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Billing Address: \_\_\_\_\_

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I wish to have my payments withdrawn automatically from the following account: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

Bank Routing Number: \_\_\_\_\_

Bank Account 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 **Milford Water Authority** utility bill. I agree that this includes all outstanding balances as well as current invoices. The full balance due will always be deducted on the utility bill due date. I authorize each charge to my account shall be the same as if I had signed a check to pay my bill. I understand that the debit amount may vary from month to month depending on usage and I will continue to receive a recurring statement with the payment amount. I understand that extra fees will apply for returned payments. I have the right to stop payment of a charge by notifying **Milford Water Authority** 15 (fifteen) days prior to the due date of my bill. In addition, I understand that both the financial institution and/or

**Milford Water Authority** reserve the right to terminate this payment plan at anytime. Also, I may elect to discontinue my enrollment in this plan at anytime. If I stop payment 2 (two) times in one year, I will be excluded from this plan.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Paperless (E-Bill) Sign-Ups** (Only NEW e-bill customers need apply)

I wish to only receive my monthly invoices electronically, via e-bill.

Email Address: \_\_\_\_\_

Return this signed form to:  
Milford Water Authority  
P.O. Box 149  
Bloomsburg PA 17815-