Gull Lake Sewer & Water Authority 7722 N. 37th Street Richland, MI 49083 (269) 731-4595 Fax: (269) 731-2596

www.glswa.org



DIRECT DEBIT AUTO PAYMENT ENROLLMENT FORM

I (We) hereby authorize Gull Lake Sewer & Water Authority to initiate debit entries to my (our) Checking Savings account indicated below at the financial institution named below, and to debit the same such account on a quarterly basis for the payment owed on the due date (on or near the 20 th of the month). I (We) acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of U.S. law. This authorization is to remain in full force and effect until Gull Lake Sewer & Water Authority has received written notification from me (or either of us) of its termination in such time and in such manner as to afford both parties a reasonable opportunity to act on it.					
APPLICANT INFORMATION					
Name (Please Print):					
	Phone	ne:			
Service Address:	dress:				
City:	State: I	MI	Zip Code:		
PAPERLESS BILLING					
Email Address:					
Would you like to enroll in paperless billing? Yes No					
BANK INFORMATION					
			Branch:		
:		State: Zip Code:			
Routing Number*:			t Number*:		
SIGNATURE(S)					
,			Name (Please Print):		
Signature:			Signature:		
Date: Date:					
VOIDED CHECK					
*Please attach a voided check if we are to debit your checking account. If you do not have a copy of a check available, our office accepts a letter from your banking institution stating the routing and account numbers. Please attach a savings deposit ticket if we are to debit your savings account. This is to ensure that Gull Lake Sewer & Water Authority obtains the accurate routing and account numbers from your financial institution.					
Note: Please notify Gull Lake Sewer & Water Authority in writing two weeks prior to any change requested, including bank, account, or termination of transaction to ensure timely payment.					