

SAN LEON MUNICIPAL UTILITY DISTRICT
443 24TH STREET
SAN LEON, TEXAS 77539
(281)339-1586
FAX (281)339-1587
EMAIL ADDRESS slmud1@slmud.org
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ACH Authorization Form

I, _____, give San Leon Municipal Utility District permission to debit bank account or credit card on the 19th of every month and to be applied to the water bill for account # _____. I affirm that I am an authorized signer for monetary transactions on the above referenced account.

Bank Information (Free of charge)

Bank Name _____
Phone _____
Routing # _____
Account # _____
Checking /Savings _____

Credit Card Information (Free of Charge)

Card Type: VISA / MASTER CARD (only)
Name on Card _____
Credit Card # _____
Billing address & zip code _____
Exp. Date _____

Customer Signature: _____

SLMUD Representative: _____

Date: _____