

## AUTOMATIC DEBIT AUTHORIZATION FORM (ACH)

I AUTHORIZE BRISTOL WATER WORKS CORPORATION UTILITIES TO BE PAID BY AUTOMATIC DEBIT
NAME:
MAILING ADDRESS
STREET:
CITY:
STATE:
ZIP:
PROPERTY ADDRESS (IF DIFFERENT FROM MAILING ADDRESS)
STREET:
CITY:
STATE:
ZIP:
EMAIL ADDRESS:
PAYMENT INFORMATION
ROUTING NUMBER:
ACCOUNT NUMBER:
NAME ON ACCOUNT:
*PLEASE INCLUDE A COPY OF A VOIDED CHECK
SIGNATURE FOR AUTHORIZATION OF QUARTERLY DEBIT:

Please note - your quarterly payment will be automatically deducted on the due date.

Please return this completed form by email:

customerservice@bristolwaterworkscorp.com

After the form is completed and returned you may use this form of payment going forward.