

HAMILTON WATER DISTRICT
P. O. BOX 66
HAMILTON, MS 39746
ACH Authorization form

Add

Change

Delete

Name on Water Acct _____ Contact Phone # _____

NAME OF BANK _____

BANK ROUTING NUMBER _____

BANK ACCOUNT NUMBER _____

HAMILTON WATER ACCOUNT NUMBER _____

MAILING ADDRESS _____

***** Do you wish to set a maximum amount that can be debited? _____ *****

Please know that if your bill exceeds the maximum amount that can be debited, you will need to pay the difference by check or money order by the 15th of each month.

I HEREBY AUTHORIZE HAMILTON WATER TO DRAFT MY CHECKING OR SAVINGS ACCOUNT FOR MY MONTHLY BILLING.

**** If you move (and stay on our water system) a new bank draft form must be filled out ****

****Please attach a voided check ****

SINCERELY,

Signature

Date