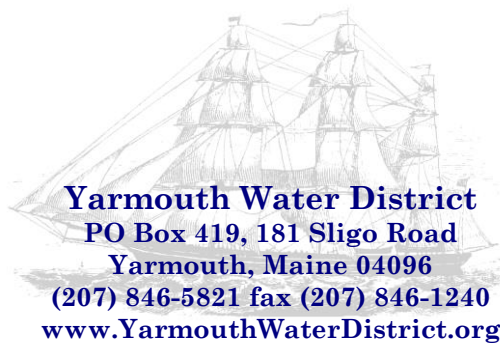


Eric Gagnon  
Superintendent



Irving C. Felker, Jr.  
Chairman, Board of Trustees

***ACH Authorization***

I authorize the Yarmouth Water District to withdraw from my account(s) as listed below for payment of my water bill(s), and confirm that I am the customer of record for the listed account(s)

I understand that I will continue to receive a water bill for my records, and that the bill will not be marked paid. Withdrawal for payment of my quarterly water bill will be on the tenth day following the due date shown on the bill or on the next business day. Payment will include all outstanding amounts for water, miscellaneous charges, interest and fees. The payment will be for the full amount outstanding on the day of the withdrawal. I understand that payments will be credited to my account in accordance to the rules of the Maine Public Utilities Commission. Payments will be posted in order listed below.

- 1<sup>st</sup> Current Water Charges
- 2<sup>nd</sup> Miscellaneous Charges, Fees and / or Interest
- 3<sup>rd</sup> Overpayment towards future water charges

I can suspend payment of a bill by notifying the Yarmouth Water District during its business hours at least 5 business days prior to the scheduled payment date. I understand that two suspensions in any twelve month periods will result in revocation of my participation.

Transactions refused due to insufficient funds will be automatically presented for payment a second time; the customer will be notified and expected to pay by other means if the item is refused again. Two denied transaction will result in revocation of the privilege.

The authorization will remain valid until revoked in writing by myself, my financial institution, or the Yarmouth Water District. I understand that the direct payment program is an alternative method of payment only, and does not otherwise affect my rights or the rights of the Yarmouth water District or my financial institution.

Customer Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Yarmouth Water District Account Number and Service Location:

\_\_\_\_\_

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

**Please include a voided check**

<u>For Office Use Only</u>	
Banking Institution:	_____
Routing Number:	_____
Account Number:	_____