

FOR CUSTOMERS WHO WOULD LIKE TO: Save time, postage, gasoline, and not having to worry about having to remember to pay a bill. **PLEASE:** Complete and sign the Authorization below, **attach a voided checking account check** and return to Chesterfield County Rural Water Company, Inc. Your bank will draft your bill monthly and you will receive a copy of your water bill as normal.

Authorization for Bank Draft

To: _____ and
Name of Bank
Chesterfield County Rural Water Company, Inc.

I hereby grant authority to Chesterfield County Rural Water Company, Inc., to draw drafts against my account in payment of my water bills. The bank is authorized to pay these drafts when so drawn and presented for payment and to charge the same to my account. I further agree to notify Chesterfield County Rural Water Company, Inc. if I withdraw this authority.

Date

Your Signature As Accepted by Bank

Your Name As Shown on Bank Account

Checking Account Number

Water Account Number

Address Where You Receive Bill

Home Telephone Number

Work Telephone Number

Drivers License Number

Social Security Number

NOTE: If you have more than one water account and wish to have Drafts drawn on all accounts, please list all account numbers below:
