

# DIRECT DEBIT AUTHORIZATION

## Enrollment for Monthly Sewer Payment via ACH Withdrawal

NAME: \_\_\_\_\_

BILLING ADDRESS: \_\_\_\_\_

CITY/STATE/ZIP: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

EMAIL (if you would prefer contact via email): \_\_\_\_\_

Please deduct my direct payment from my account as listed below:

(\*\*Please enclose a voided check for verification\*\*)

FINANCIAL INSTITUTION: \_\_\_\_\_

ROUTING/TRANSIT#: \_\_\_\_\_

ACCOUNT #: \_\_\_\_\_

CHECKING ACCOUNT    OR     SAVINGS ACCOUNT

PLEASE INDICATE WHETHER YOU WOULD LIKE YOUR PAYMENT  
DEDUCTED ON THE 5<sup>TH</sup> OR THE 20<sup>TH</sup> OF EACH MONTH.

DEDUCT ON THE 5<sup>TH</sup>                       DEDUCT ON THE 20<sup>TH</sup>

Amount of Monthly ACH Payment: \$ 46.00

I authorize Glade Township to deduct my sewer payment from the account listed above.  
I understand that if I decide to discontinue this payment plan I will notify Glade  
Township in writing at the following address:

Glade Township  
1285 Cobham Park Rd.  
Warren, PA 16365

SIGNATURE: \_\_\_\_\_                      DATE: \_\_\_\_\_