

BECKLEY SANITARY BOARD

301 S Heber Street
Beckley, WV 25801
(304) 256-1760

AUTOMATIC PAYMENT SERVICE APPLICATION AUTHORIZATION

Name *(please print as shown on bill)* _____

Address _____ City _____ State _____ Zip _____

Beckley Sanitary Board Account Number _____

Day Time Telephone Number _____

To participate in the Beckley Sanitary Board's Automatic Payment Service,

I _____ *(account holder's name)* authorize the Beckley Sanitary Board to instruct my financial institution

_____ *(bank, savings & loan or credit union)* water and/or wastewater bill payments from the following account, as they are due:

Checking (Account # _____)
Address & Phone Number of Financial Institution -- *Please provide a voided check*

Savings (Account # _____)
Address & Phone Number of Financial Institution -- *Please provide deposit ticket*

I understand that I am in full control of the Automatic Payment Service. If at any time I decide to discontinue it, I will notify the Beckley Sanitary Board. I understand this information will be used solely for the **Automatic Payment Service**.

Simply complete this application and return it to us at **301 South Heber Street, Beckley, WV 25801**, along with a **voided check** from your checking or a **deposit ticket** for your savings account. The automatic funds transfer will normally begin within forty-five (45) days after receipt of your application information. If you have any questions please call (304) 256-1760. ******You will continue to receive a copy of your bill******

Signature

Date