HWEA Customer,

Attached you will find an authorization form for our ACH program. This will authorize Hopkinsville Water Environment Authority to electronically withdraw your monthly water bill payment from the account provided. Please attach a voided check or bank documentation reflecting routing number and account number to the completed form and return it to our office located at 401 E. 9th Street in Hopkinsville.

A monthly statement showing the amount to be withdrawn will arrive before the withdrawal date. The withdrawal drafts on the due date stated on the bill unless the date falls on a weekend or holiday. If that is the case, the withdrawal will take place the following business day.

Please be advised that it will take approximately three business days for your automatic withdrawal to begin. Also, if we receive an ACH return you will be subject to the bill amount plus an additional return payment fee of \$50. If we receive two consecutive return payments, your account will be removed from the ACH program.

We look forward to serving your ACH needs,

HWEA Customer Service

NOTE: It is your responsibility to contact our office if any banking information changes.

Bank Electronic Pay Authorization:

Name on Account: Service Location Address: Acct #:

EXCELLENCE - INTEGRITY - COMMUNITY

Hopkinsville Water Environment Authority

401 East Ninth Street • PO Box 628 • Hopkinsville, KY 42241-0628



Phone: (270) 887-4246 Fax: (270) 887-2798

Derrick W. Watson PRESIDENT & CEO

Name on Account:	Billing Address:	Acct #:
Depositor's Name as Shown on Bank Recor	rds (Print): NOTE:	
Name of Financial Institution:	It w the ACI	vide a voided check or deposit slip ill take approximately 3 business days for ACH draft to initiate H returned payments are subject to a \$50 plus the bill amount.
Location of Financial Institution: (Street, City	(& State) • Acc	counts with two or more consecutive irns will be subject to removal from ACH.
Bank's ABA Routing Transit Number: Account Number: Checking or Saving		Bank Code: Completed: FOR BILLING USE ONLY
As a convenience to me and in accordance with the represcharge to my account any channels by water, wastewater, Banks Electronic Automated Clearing House Hopkinsville	and garbage bills that are trar	, I hereby authorize you to pay and to
I agree that payment for my water, wastewater, and garbag charged to my account as listed on this authorization. I furt special advice or notice in writing or otherwise of the charg and effect until revoked by me in writing, and until you actu honoring any such electronic transfer. Hopkinsville Water E	ge bills issued by Hopkinsville ther agree that you shall be ur ling of same to my account. The lally receive such notice I agre	nder no obligation to furnish me with any his authorization is to remain in full force se that you shall be fully protected in
<u>X</u>		Date:
NOTE: If the information on this form does not agree with y Bank's ACH transfer program or if this arrangement is unsa Environment Authority, P.O. Box 628 Hopkinsville KY, 4224	atisfactory in any way, please	·