**SABINE PARISH WATERWORKS DISTRICT #1**

P.O. BOX 660

MANY, LA 71449

Phone: 318-256-6489 Fax: 318-256-6434

Email: [lindy.strahan@spwd.co](mailto:lindy.strahan@spwd.co)

**AUTOMATIC BANK DRAFT AUTHORIZATION FORM**

Please complete the following information and mail, email or fax this form to Sabine Parish Waterworks District #1 at the address, email address or fax number listed above.

**(Please *Print* all information)**

|  |  |
| --- | --- |
| Customer Name(s) as Appears on Water Bill | Water Service Account Number |
| Service Address | Daytime Phone Number |

Bank Name Name(s) as Appears on Bank Account

Bank Routing Number Bank Account Number

Account Type (check one): ( ) Checking ( ) Savings

I authorize Sabine Parish Waterworks District #1 to debit (draft) the account identified above each month for the amount of services billed on my water utility account. Additionally, I authorize my financial institution identified above to debit the same amounts from my account. I understand that this authorization will be in effect until I notify Sabine Parish Waterworks District #1 and my bank, in writing, that I no longer desire this service. I also understand that if corrections in the debit amount are necessary, it may involve an adjustment (credit or debit) to my utility account.

Customer Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# Please Attach a Voided Check Here