

**SIGNAL MOUNTAIN WATER COMPANY  
ACH DRAFT BANKING AUTHORIZATION**

\_\_\_\_\_  
(Name-Please Print)

\_\_\_\_\_  
Water Account Number

I authorize the Signal Mountain Water Dept. and the financial institution named below to initiate entries to my checking/savings accounts, and, if necessary, initiate adjustments for any transactions credited in error. This authority will remain in effect until I notify you in writing to cancel it in such time as to afford the financial institution a reasonable opportunity to act on it. I can stop payment of any entry by notifying my financial institution 3 days before my account is charged. I can have the amount of an erroneous charge immediately credited to my account up to 10 days following issuance of my quarterly water billing.

\_\_\_\_\_  
(Name of financial institution)

\_\_\_\_\_  
(Address of financial institution) (Street) (City) (State) (Zip Code)

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Date)

Checking A/C # \_\_\_\_\_ (or) Savings A/C # \_\_\_\_\_

Financial Institution Routing # \_\_\_\_\_

**PLEASE PROVIDE A VOIDED CHECK TO ENSURE CORRECT BANK INFORMATION**

NOTE: In the case of revoked authorization, all written authorization must be revoked only by notifying the Signal Mountain Water Company in writing no later than 15 days before the next transaction effective date. A fee of \$25.00 will be imposed on any transaction not honored by your financial institution. Should this problem not be resolved within 7 days, water service will be terminated and a \$25.00 disconnect fee will be charged.