

Location No: \_\_\_\_\_

**TOWN OF CLOVER  
AUTHORIZATION FOR BANK DRAFT  
WATER AND SEWER DEPARTMENT**

The Town of Clover is pleased to offer you the availability of bank draft. By authorizing this draft, the worry of paying water bills on time is eliminated. The Town will process all necessary paperwork and will automatically draft the bill amount out of the customers designated account. Accounts will be drafted on the third of the month or the first business day after the third for their total bill amount. Customers who authorize the drafting of their accounts will receive a monthly bill stating the account will be drafted. (Please attach a voided check to this application for processing.)

**BANK DRAFT AUTHORIZATION**

This is my authorization to the Town of Clover to automatically debit my bank account for the payment of all water and sewer bills. (Bill includes water, sewer and sanitation charges) I understand that this authorization will be in effect until I notify the Town of Clover and my financial institution in writing that I no longer desire this service, allowing it reasonable time to act on my notification. I also understand that if corrections in the debit amount are necessary, it may involve adjustment (credit or debit) to my account.

I have the right to stop payment of a debit entry by notifying my financial institution before the account is charged. If an erroneous debit entry is charged against my account, I have the right to have the amount of the entry credited to my account by my financial institution. I give my financial institution a written notice identifying the entry, stating that it is in error and requesting credit back to my account if within 15 calendar days following the date, or 45 days after posting, whichever occurs first.

I understand that the Town may impose a processing fee in the event the debit entry is not paid by my financial institution for a valid reason.

Printed Name \_\_\_\_\_

Signed \_\_\_\_\_ Date \_\_\_\_\_

**CUSTOMER INFORMATION**

NAME ON BANK ACCOUNT \_\_\_\_\_ DATE \_\_\_\_\_

SERVICE ADDRESS \_\_\_\_\_ NAME OF BANK \_\_\_\_\_

PHONE NUMBER \_\_\_\_\_ BANK ACCOUNT NUMBER \_\_\_\_\_

DATE TO START DRAFT \_\_\_\_\_ BANK ABA ACCOUNT NUMBER \_\_\_\_\_

SAVINGS OR CHECKING ACCOUNT \_\_\_\_\_