

**South Buffalo Township Municipal Authority
167 Northpointe Blvd, Suite 300
Freeport, PA 16229
sbtma167@gmail.com
724.295.0430**

AUTOMATIC BANK DRAFT/DIRECT DEBIT AGREEMENT

I _____ hereby authorize *South Buffalo Township Municipal Authority* and my financial institution to automatically withdraw water payments from the account I provided for the charges incurred at my service address(s).

Circle one of the account types:

CHECKING
(Attach a voided check please.)

SAVINGS
(Attach a voided savings slip please.)

I understand that payment will be deducted within 5 days of the DUE DATE printed on the monthly bill. I also understand that I will be subject to the current returned transaction fee then in effect if funds are NOT available at the time of the bank draft. Your bank may also charge returned transaction fees.

If I choose to **CANCEL** automatic direct debit, I must submit any termination request in writing by mail, fax, or email giving effective notice for the termination.

I also understand that *SOUTH BUFFALO TOWNSHIP MUNICIPAL AUTHORITY* reserves the right to terminate the automatic bank draft if they so choose.

I have read, understand, and agree to this authorization.

AUTHORIZED SIGNATURE: _____ **DATE:** _____

SERVICE ADDRESS: _____

BILLING ACCOUNT #: _____ **PHONE #:** _____