

TOWN OF

RANDOLPH VOLLER  
Mayor

WILLIAM G. TERRY  
Town Manager

PAUL S. MESSICK, JR.  
Town Attorney

P.O. Box 759 – 635 East Street  
PITTSBORO, N.C. 27312



BOARD OF COMMISSIONERS

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**DIRECT DEBIT OF MONTHLY BILLS**

Direct debit is a service in which your monthly bill is withdrawn electronically from the financial institution of your choice. The funds will be debited from your account the 1<sup>st</sup> of each month. Your bill will be automatically credited to your account at Town of Pittsboro water department. We will mail your water bill to you for informational purposes only. In addition, you will see the debit amount and date reflected on your next bank statement.

To receive the many benefits of this service, you will need to sign an authorization for us to automatically debit your personal checking account for monthly bill. We will also need a cancelled check from your account. We will transmit your debit information to the Company's bank for processing. The information will then be transmitted to your bank for withdrawal from your account. Because virtually all financial institutions participate in the direct debit program, there should be no need to alter your current banking arrangement.

- ~ You will be assured of continued water service with no late charges.
- ~ There is no need to waste time and money mailing a check.
- ~ Your billing funds are secure, so you don't have to worry about lost or stolen check.s.
- ~ Payment information is strictly confidential.
- ~ There is no cost for you to participate in the program.

**AUTHORIZATION AGREEMENT FOR PREARRANGED PAYMENT (ACH DEBITS)**

Town of Pittsboro

ID No.

I hereby authorize \_\_\_\_\_ to initiate charges to the checking account in the amount specified below, and the depository named below is authorized to debit that account. A water bill will be mailed prior to the scheduled date of transfer indicating amount to be debited.

Depository Name \_\_\_\_\_ Branch \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Bank Transit/ABA \_\_\_\_\_ Account Number \_\_\_\_\_

This authorization is to remain in full force and effect until Town of Pittsboro has received written notification from me of its termination in such time and in such manner as to afford Town of Pittsboro and Depository a reasonable opportunity to act on it.

Name \_\_\_\_\_ Identification No. \_\_\_\_\_

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