AUTOMATIC BANK DRAFT

Please Print Clearly or type and return to:

South Woodford Water District 117D Versailles, Ky 40383 Ph/fax 859 873-1308

I (we) authorize the South Woodford Water District, 117-D Crossfield Drive, Versailles, Ky. And the financial institution shown below to automatically debit the bank account shown below for payment of all bills issued. I understand that it is my responsibility to notify the South Woodford Water District, IN WRITING, if I change banks or account numbers. This authorization will be in effect until either party gives written notice to the other of termination. I understand my notice of termination must be received in time to have reasonable opportunity to act.

Customer:	
South Woodford Wa	ater Account #
Service Address	
Daytime Phone	
Account Type: Chec	ckingSavingZip
Bank Name	
Customer's Mailing	Address:
Signature:	Date Signed:
IMPORTANT: YOU MUST	ATTACH A VOIDED CHECK.
Example of check : Account holder name	Do Not include the check# in the Routing or Account number
John Doe Street Address Town, City Zip code	check #1234 date
Pay to:	
Financial Institution Name and Address	
For:	Signed by:
1:123456789# (Routing/	(Transfer Number) 12345678 (Acct Number) 1234(Check number)