

Inlet Beach Water System, Inc.
Utility Bill ACH Payment Form (OPTIONAL)

Authorization for Automatic Payments of Water and Sewer Utility Bills

Complete this form and return with a VOIDED check to
office@inletbeachwater.com

NAME/BUSINESS: _____
(as it will appear on utility bill)

IBWS ACCOUNT # (if known): _____

SERVICE ADDRESS: _____, Inlet Beach, FL

PHONE: _____

MAILING ADDRESS: _____

CITY, STATE & ZIP: _____

BANK NAME: _____

CITY AND STATE: _____

BANK ROUTING NUMBER: _____

CHECKING ACCOUNT NUMBER: _____

**I authorize you to deduct from my checking account the amount of any Inlet Beach Water System, Inc.'s water/sewer bill and to make that deduction payable to the Inlet Beach Water System. In making this authorization, I agree to all the terms as listed below.

I authorize the financial institution named on this form to pay my water and sewer utility bill by charging each payment to my account. I agree that each payment shall be the same as if it were an instrument personally signed by me. This authority begins immediately and will remain in effect **until revoked by me in writing. In addition, I have the right to stop payment of a charge by timely notification to my financial institution prior to charging my account. I understand, however, that both the financial institution and Inlet Beach Water System reserve the right to terminate this payment plan (or my participation therein).

**All direct payments will be processed on the 20th of the month (unless the 20th falls on the weekend or a legal holiday, in which case it will be processed on the last business day prior to the 20th).

**Any payment returned for any reason will incur a returned item fee as listed below:

- \$25 for all payments of \$50.00 or less
- \$30 for all payments between \$50.01 and \$300.00
- \$40 for all payments between \$300.01 and \$800.00
- 5% of face value of payment for all payments \$800.01 and greater.

Signature: _____ Date: _____