



EAST ROCKHILL TOWNSHIP

1622 North Ridge Road, Perkasie, Pennsylvania 18944

Phone 215-257-9156 • Fax 215-257-1299

Public Sewer & Street Light District

Dear Customer:

If you would like to avoid writing checks and paying postage or paying convenience fees when paying by credit card, you can take advantage of ACH Debit from your checking or savings account when paying your quarterly sewer bill or annual street light assessment. Payment will be deducted from your account the day the bill is due. **If you wish to stop ACH debit for any reason, it is your responsibility to inform the Township in writing at the above address at least two (2) weeks in advance of any payment scheduled to be withdrawn.**

This authorization agreement must be completed for every customer utilizing ACH Debit Recurring Payment from either checking or savings account. If you have questions regarding this option, please call the Township office.

Return completed form to: East Rockhill Township, 1622 N. Ridge Road, Perkasie, PA 18944

This authorization agreement allows East Rockhill Township to initiate ACH debits to the customer's account and allows the receiving institution to accept the debit entries withdrawing funds from the proper account.

AUTHORIZATION AGREEMENT FOR AUTOMATIC ACH RECURRING PAYMENT

I hereby authorize East Rockhill Township to initiate automatic withdrawals from my bank account for the amount indicated on my/our quarterly sewer bill and annual street light bill (if applicable). The payment from said account will be in the **full amount due** as stated on the bill.

I would like my bill emailed to save paper I would like to receive a paper copy

Account Type:	<input type="checkbox"/> Checking	<input type="checkbox"/> Savings	
Bank Name	_____		
Account Number	_____		
Bank Routing #	_____		

This authorization is to remain in full force and effect until East Rockhill Township has received **WRITTEN** notification from me/us to terminate. Any changes in information must be received no less than **two (2) weeks** in advance of any payment scheduled to be withdrawn. ACH recurring payment will begin with the next billing cycle after this form is received. Accounts must be paid in full at the time of application. Any ACH payment made on overdrawn accounts will have fees added to the account according to the current fee schedule.

Sewer / Street Light Account # Billing Address _____

Name _____ Email _____ Daytime Phone # _____

Mailing Address (if Different than Billing Address) _____

SIGNATURE _____ DATE _____

PLEASE INCLUDE A VOIDED CHECK (CHECKING ACCOUNT) OR DEPOSIT SLIP (SAVINGS ACCOUNT) FROM THE ACCOUNT YOU WISH TO ACH DEBIT