

BOROUGH OF WORMLEYSBURG
20 MARKET STREET
WORMLEYSBURG PA 17043
Email: info@wormleysburgpa.org

AUTHORIZATION AGREEMENT FOR PREAUTHORIZED DEBITS

As a convenience to me, I hereby authorize Wormleysburg Borough to withdraw payment for my sewer and/or trash bill (via automatic quarterly bank draft) from my Bank or Credit Union Account and to apply this payment to my sewer and/or trash account.

I understand that this agreement will remain in effect until I provide Wormleysburg Borough with a thirty (30) day written notice of termination of agreement. Wormleysburg Borough will acknowledge in writing, the termination notice has been received.

I understand that I will receive a bill dated the 1st of the billing month and that the draft will be deducted from my account on the 30th of the billing month. Billing months are January, April, July, and October.

Should my bank draft not be honored by my Bank or Credit Union, for any reason, I realize that I am still responsible for the payment plus a service charge applied by Wormleysburg Borough. This is in addition to any service fee charged by the Bank or Credit Union.

I further agree that the rights of Wormleysburg Borough shall be protected with respect to the quarterly bank draft and that Wormleysburg Borough's rights shall be the same as if the draft were a check drawn by me and personally signed by me.

I further agree that if any such check be dishonored, whether with or without cause, whether intentionally or inadvertently, Wormleysburg Borough shall be under no liability whatsoever even though such dishonor results in additional penalties and possible service termination.

I hereby authorize Wormleysburg Borough to initiate debits in the amount of my sewer and/or trash bill from my checking or savings account, as indicated below. If an error occurs in the transaction amount, I hereby authorize Wormleysburg Borough to initiate a correcting transaction to/from my checking or savings account indicated below.

Bank Name: _____

City: _____ State _____ Zip _____

Transit/ABA Number _____ Account Number _____

Checking _____ Savings _____

Property Owner: _____

Address: _____

Sewer/Trash Account Number: _____

Email Address: _____

Signature(s) _____

Date: _____