



AUTOMATIC WITHDRAWAL AUTHORIZATION FORM

INITIAL (NEW) APPLICATION _____ CHANGE ACCOUNT _____ CANCELLATION _____

AUTHORIZATION AGREEMENT FOR PREAUTHORIZED PAYMENTS
COMPANY: Pierce County Public Works EIN: 91-6001359

SEWER ACCOUNT NUMBERS (IF YOU HAVE MORE THAN ONE ACCOUNT, PLEASE LIST ALL ACCOUNT NUMBERS) _____

PROPERTY ADDRESS _____

CUSTOMER NAME(S) _____

CUSTOMER MAILING ADDRESS _____

CUSTOMER PHONE _____ CUSTOMER EMAIL _____

BANK NAME _____

BANK ADDRESS/BRANCH _____

BANK ROUTING NUMBER (9 Digits) _____ BANK ACCOUNT NUMBER _____

ACCOUNT TYPE TO BE DEBITED Checking Savings

PLEASE ATTACH A VOIDED CHECK. DEPOSIT SLIPS ARE ONLY ACCEPTED FOR SAVINGS ACCOUNTS

BOTH SIGNATURES ARE REQUIRED ONLY IF THE BANK ACCOUNT REQUIRES TWO SIGNATURES.

I (WE) ACKNOWLEDGE AND UNDERSTAND THAT IT IS MY (OUR) RESPONSIBILITY TO NOTIFY PIERCE COUNTY PUBLIC WORKS IF THE CHECKING/SAVINGS ACCOUNT HAS BEEN CLOSED OR IF THE BANK INFORMATION HAS CHANGED. FAILURE TO DO SO MAY RESULT IN A RETURNED PAYMENT FEE AND ANY LATE CHARGES TO BE ADDED TO MY (OUR) ACCOUNT. ACCOUNTS WILL BE REMOVED FROM AUTOMATIC WITHDRAWAL IF TWO (2) CONSECUTIVE PAYMENTS ARE RETURNED BY THE BANK.

SIGNATURE DATE SIGNATURE DATE

I (we) authorize Pierce County Public Works to instruct my (our) financial institution to make payments on my (our) behalf. I (we) acknowledge and understand that payments will be automatically deducted on or around the 20th of the month. When the due date falls on a weekend or holiday, the draft will occur on the first banking day after the weekend or holiday. **This authorization will remain in effect until Pierce County Public Works receives my (our) written direction to cancel or change the authorization (up to 2 weeks is needed for processing) or until Pierce County Public Works notifies me (us) that it has been cancelled.**

DEPENDING ON YOUR BILL CYCLE, 1-3 MONTHS OF CHARGES MAY BE WITHDRAWN FOR YOUR FIRST DRAFT. PLEASE CONTACT CUSTOMER BILLING SERVICES FOR MORE INFORMATION.

I do not wish to receive a monthly copy of my bill. You will receive a bill copy unless you check this section or contact Customer Billing Services and request a bill not be sent to you.

PLEASE MAIL COMPLETED FORM TO (FAXED OR E-MAILED FORMS WILL NOT BE ACCEPTED):

Pierce County Planning and Public Works
Customer Billing Services
9850 64TH ST W
University Place, WA 98467
(253) 798-4020

John Doe 101
123 4th Ave E Date _____
Tacoma, WA 98399
Pay to _____ \$ _____
40219094784 792000472763 101

(ATTACH VOIDED CHECK HERE)

↑ Bank routing Number Account Number ↑