



ACH DRAFT PAYMENT

Now Available

Payment by Bank Draft

**Simplify Your Life
Avoid missing your Bill Due Date!**

Sign up is easy. Complete the requested information below and submit this form along with a **VOIDED CHECK** from your checking / saving account. If you do not have a check be sure to PRINT CLEARLY your banking information.

Your account will be debited on the 1st day of each month except for weekends, holidays, etc., at which time processing will take place on the next business day. You will still receive your monthly billing statements as a reminder the funds will be coming out.

AUTHORIZATION FOR BANK DRAFT (ELECTRONIC FUNDS TRANSFER)

Customer #: _____
Your Name: _____
Email Address: _____
Service Address: _____
Telephone Number: _____
Your Bank Routing #: _____
Your Bank Account #: _____
Bank Name: _____
Please check one: Checking () Savings ()

I understand any payment refused by my bank will be handled the same as an “insufficient funds” check (NSF) and charged an overdraft fee of \$30.00 After two refused payments by my bank, the Bank Draft payment will be cancelled and my account will be put on “cash only” status for one year, from the date of third return.

Signature below indicates acceptance of these terms and conditions.

Signature: _____

Date Signed: _____

For questions please contact:
Integra Water Services
Customer Service
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P: 1-877-511-2911
E: info@integrawater.com