

## ACH DIRECT WITHDRAW PROGRAM FOR SEWERAGE PAYMENTS

Cinnaminson Sewerage Authority now offers an ACH bank withdraw program (direct withdraw) to our rate payers. Some advantages of this program are:

Provides a safe and secure way to pay your quarterly sewer bill without the worry of writing out a check, or coming to pay your bill in person

Payments will automatically be processed for you in the amount of your quarterly sewer bill

Payments will be automatically debited from your checking or savings account on the 20<sup>th</sup> of your billing quarter.

You are still responsible to assure that sufficient funds are available in your bank account to cover the automatic withdraw on the scheduled payment date.

You may cancel at any time, provided a completed authorization form is received at least two weeks prior to the scheduled payment dates—along with the appropriate payment in the form of cash or a check.

Please complete the entire authorization form on the reverse side and attach a voided check. Applications effective March 1, 2011 are currently being accepted.

**AUTHORIZATION AGREEMENT FOR (ACH) DIRECT  
WITHDRAWALS OF QUARTERLY SEWER PAYMENTS**

Check One: New Authorization \_\_\_\_\_ Change of Account \_\_\_\_\_  
Cancellation \_\_\_\_\_

I hereby authorize Cinnaminson Sewerage Authority to initiate debit entries to my checking/savings account indicated below. I hereby authorize the depository named below to debit the same amount to my bank account. Such debit entry will take place on the 20<sup>th</sup> day of the month in which the sewerage bill was issued.

Bank Name \_\_\_\_\_ Branch Address \_\_\_\_\_

Transit/ABA Number \_\_\_\_\_

Account Number \_\_\_\_\_ Checking or Savings \_\_\_\_\_

This authorization is to remain in full force and effect until the Cinnaminson Sewerage Authority has received written notification from me of its termination in such time and manner as to afford the Sewerage Authority and the Bank a reasonable opportunity to act on it and in no event shall a termination notice be effective with respect to entries processed by the Sewerage Authority or the Bank prior to its receipt in the office of the Sewerage Authority. The Bank information provided in this form shall remain confidential from all other sources and be used solely for the purpose described in this form. If any debit entry is denied by the above named Bank, your account with the Sewerage Authority will be charged a return fee of \$20. Certified funds or cash will then be required to fulfill your obligation with the Cinnaminson Sewerage Authority for that payment.

Name \_\_\_\_\_ Property Location \_\_\_\_\_

Customer Billing Account Number \_\_\_\_\_

Mailing Address (if different from above)

Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email Address \_\_\_\_\_ Phone Number \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

All information is required. Sign and return form to: Cinnaminson Sewerage Authority  
1621 Riverton Rd.  
Cinnaminson, NJ 08077