

TUCKASEIGEE WATER & SEWER AUTHORITY
1246 West Main Street
Sylva NC 28779
Phone: (828) 586-5189 – Fax: (828)631-9089

Bank Draft Authorization Form

Please Print:

Name (*as shown on Bank Record*)

Checking Account No.

I hereby authorize the Tuckaseigee Water & Sewer Authority to draft the account listed on this authorization form and agree that the utility's rights in respect to each such draft or check shall be the same as if issued and signed personally by me. I understand that in the event my account has insufficient funds to cover the monthly payment amount drafted, a \$25 fee will be assessed and debited from my account in addition to the monthly payment due.

I agree that this authorization is to remain in effect until revoked by me in writing and until the utility actually receives such notice.

I attest I am the authorized owner of the Depository Account listed on this form and am exercising my powers as such. I hereby authorize my monthly water and/or sewer bill(s) to be paid by my bank.

Depositor's Signature

Phone Number

NOTICE TO BANK: If the information on the form does not agree with your records please contact the Tuckaseigee Water & Sewer Authority, 1246 West Main Street, Sylva NC 28779.

Authority's use only

Customer's Utility Account Number _____

Date received: _____ By: _____

Attach Voided Check Here