

PUBLIC WATER SUPPLY DISTRICT NO. 6 OF CLAY COUNTY
PO BOX 227
1061 COUCHMAN DRIVE
KEARNEY, MO 64060-0227
(816) 628-3220 OFFICE • (816) 628-3229 FAX

AUTOMATED PAYMENT PROGRAM

Public Water Supply District (PWSD) #6 of Clay County provides a bank draft program available to their customers choosing to have their monthly water utility bill automatically deducted from their bank account. This is at no charge to the customer.

The program will save customers the cost of postage and checks, eliminates monthly check writing and provides a record of payment on the customer's bank statement. Additionally, customers will continue to receive their monthly bill through the mail, as a method to inform the customer of their water utility usage and cost.

Those customers interested in taking advantage of this benefit must complete the AUTOMATED PAYMENT AUTHORIZATION FORM available at the office, including providing an unsigned, voided check.

Following customer sign up for the program, it may take PWSD #6 of Clay County up to two (2) months to initiate the program with the corresponding bank. During the start up period, the customer will continue to receive water utility bills for payment. Once the initiation is complete, the **"AFTER DUE DATE, PAY THIS AMOUNT" portion of the customer's bill will state: "PD BY DRAFT"**.

PWSD #6 of Clay County will draft the payment for the utility bill from the customer's bank account provided on the due date of the utility bill or the 15th of the month. If the 15th of the month falls on a weekend or holiday, the payment will draft on the next working business day. The customer will continue to receive their monthly utility bill at the regular time.

Should a customer wish to discontinue participation in the AUTOMATED PAYMENT PROGRAM, PWSD #6 OF Clay County must receive written notification from the customer to terminate the AUTOMATED PAYMENT AUTHORIZATION FORM.

For more information, please call (816) 628-3220.

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AUTOMATED PAYMENT AUTHORIZATION FORM

I (we) hereby authorize Public Water Supply District #6 of Clay County, herein called District, to initiate debit entries to my (our) account indicated below and the bank named below, herein called Depository, to debit such account. I (we) understand that the District will debit the below listed account to collect amounts due for water utility services. I (we) understand that a Not Sufficient Funds (NSF) fee may be charged to your account, as allowed by the applicable law, if any item is returned for any reason. Please select appropriate account type below.

{ } Checking Account

{ } Savings Account

Bank Name _____

City _____, State _____

Routing # _____ Bank Account # _____

This authority is to remain in full force and effect until District and Depository have received written notification from the person(s) listed below of this termination in such time and in such manner as to afford District and Depository to act.

Customer Name(s) _____

Service Address _____

_____, Missouri

Phone Number _____

Customer Driver's License # _____

Water Account # _____

Signature(s) _____ Date _____

Signature(s) _____ Date _____

*****Please enclose a VOIDED CHECK with this form.*****
Accounts will be debited on the 15th of the month.
Thank You!!