



P.O. Box 51 Buckner, KY 40010  
502-222-1690 Fax 502-222-1694

## *Request for automatic payment service:*

Oldham County Water District Account #: \_\_\_\_\_

Name: (as shown on bill.) \_\_\_\_\_

Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Add: \_\_\_\_\_ Change: \_\_\_\_\_ Delete: \_\_\_\_\_

**MAY TAKE UP TO ONE BILLING CYCLE BEFORE IT WILL START. ANY CHANGES OR REMOVAL FROM BANK DRAFT MUST BE IN WRITING AND MAY TAKE UP TO ONE BILLING CYCLE TO OCCUR.**

Name of Bank: \_\_\_\_\_

Bank Routing Number: \_\_\_\_\_

Customer Bank Account Number: \_\_\_\_\_

(Please attach copy of voided check.)

*I hereby authorize Oldham County Water District to draw transfers: (debit entries) against my bank account in payment of water/sewer service on the account shown above. I understand that I will be notified in writing a minimum of ten days before any debits are charged against my account. I understand that if my account does not have sufficient funds to cover the debit, I will be charged \$25.00. It is my responsibility to notify the water company of any changes that affect my account. This authorization terminated upon the request of either party.*

\_\_\_\_\_  
Date:

\_\_\_\_\_  
Customer Signature (as on file at bank)

(Mail, fax or email this signed & completed form to our office)