Town of Mount Pleasant Draft Authorization Form

(our) account indicated DEPOSITORY, to deb force and effect until th of us) of its termination	d below and the Financial In it and/or credit the same to ne Town of Mount Pleasant n ten days before the payme	rize the Town of Mount Pleasant to and adjustments for any debit entry istitution named below, hereinafter of such account. This authority is to rehas received written notification from the draft date (by the 1st of the draft ORY a reasonable opportunity to account.	alled emain in full n me (or either <i>month)</i> as to
The DRAFT DATE will be on the 10th of each month.			
In the event of default or failure of the payment to process, a fee of \$35 will be applied to the account. The Town will contact the customer by the phone number provided below to notify them of the default or failure of the payment to process. At that point the customer will be responsible for providing another form of payment for that month. Failure to pay by the 20th will result in a \$10 late fee being added on the 21st. The following month the draft will continue unless written request to terminate the Automatic Draft is provide to the Town of Mount Pleasant.			
Customer(s) Name:		Phone Number:	
Customer(s) Address:		Water/Sewer Account #:	
IMPORTANT: Please check one of the following Checking Savings Name on Checking or Savings Account:			
Bank Routing#	Account #		
		ddress:	
	place:10th, 2	 0 Date:	
	Attach voided check o	r savings deposit slip here.	