



17764 County Road 26
Tyler, Texas 75707
Phone: 903-566-1320 Fax: 903-566-1377
E-mail: office@jacksonwatersupply.com

Customer Application for Automatic Bank Draft Program

Account Name: _____ JWSC Account#: _____

I hereby authorize Jackson Water Supply Corp. to initiate debit entries to my

(select one) Checking Account Savings Account

listed below, and to debit the same to such account. I acknowledge that the origination of ACH transactions to my account must comply with the provisions of U.S. law.

Bank Name: _____ Branch: _____

City: _____ State: _____ Zip: _____

Routing #: _____ Account #: _____

This application is to remain in effect until Jackson Water Supply Corp. has received written notification from the account holder to terminate Auto draft payments. Requests to terminate Auto draft payments must be received before the Auto draft processing day, which is the 5th of each month.

Signature: _____ Date: _____

Note: This application will be considered void after 2 returned drafts in a 12 month period and will be canceled with notice given to account holder. If this cancellation occurs, account holder must have 12 months of on time payment history before reapplying for the Automatic Draft Program.

DO NOT WRITE BELOW THIS LINE (for company use only):

Received by: _____ Date: _____

Entered into billing system on: _____