



Pearland Water Billing & Collections  
 3523 Liberty Drive  
 281.652.1603

## Enrollment in Automatic Bank Drafting

Office Use Only					
Clerk Initials		Date		Account Number	
Identification Checked	<input type="checkbox"/>	Valid Email Address Obtained?	<input type="checkbox"/>	Valid Account & Routing Number?	<input type="checkbox"/>

### Customer Information

Name: \_\_\_\_\_ Account Number: \_\_\_\_\_

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

Phone Number: \_\_\_\_\_ Valid Email Address: \_\_\_\_\_

### Account Holder Information

Name on Account: \_\_\_\_\_

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

Routing Number: \_\_\_\_\_ Account Number: \_\_\_\_\_

### Customer Agreement

Terms & Conditions	
<input type="checkbox"/>	I understand by enrolling in this program the total amount due on my account will be drafted monthly on my due date and can take up to 30 days to go into effect.
<input type="checkbox"/>	I understand that to suspend or terminate this program, I am required to submit a request in writing 10 business days before my due date or the payment will have the possibility of processing on the due date.
<input type="checkbox"/>	I understand that if my bank draft is declined for any reason, I will be charged a \$25 NSF fee and my account will be subject to penalties and/or disconnection.
<input type="checkbox"/>	I understand that I am required to submit a voided check and proper documentation to the City of Pearland to complete my enrollment in Bank Drafting.

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