

**SARDIS CITY WATER & SEWER BOARD  
BANK DRAFT PERMISSION FORM**

\_\_\_\_\_

Date

\_\_\_\_\_

water acct. #

I \_\_\_\_\_ (name on bank account) give SARDIS CITY WATER DEPARTMENT the authority to draft the amount of the water bill in the name of \_\_\_\_\_ from my checking account monthly. Drafts are processed between the 6<sup>th</sup> and 8<sup>th</sup> of each month. Customer will continue to receive a monthly water bill stating the amount of the draft.

If my draft is returned unpaid by my bank, I understand I will be required to pay a **\$30.00** insufficient charge fee in cash within 10 days to Sardis City Water Department to avoid disconnection. I understand that the third returned draft will result in removal from the bank draft program and the account becoming a cash only account.

\_\_\_\_\_

Customer Signature

*Attach copy of check below*