

Woodbine Special Utility District

PO Box 1257 / 17 CR 209
Gainesville, TX 76241
940.668.8337 940.665.0927 (fax)
www.woodbinewater.com
service@woodbinewater.com



EST. 1968

ACH Debit Authorization

Name: _____

Address: _____

Phone #: _____

Woodbine S.U.D. Acct. #'s: _____

I, _____, hereby authorize Woodbine Special Utility District, Woodbine, TX, to initiate a monthly ACH Debit for my water service. This authorization will remain in force until Woodbine Special Utility District receives written notice from me and has reasonable time to act upon it.

Signature

Date

Bank Name: _____

Bank Address: _____

Bank Phone #: _____

Bank Account #: _____

Bank ACH Routing #: _____

Checking Account _____ Savings Account _____

Personal Account _____ Business Account _____

ATTACH VOIDED CHECK HERE