

The Town of Salem Advancement Services

5-A Park Avenue Salem, SC 29676

864-944-2819

email: *wnichols@salem-sc.us* or *awatkins@salem-sc.us*

Automatic Bank Draft

Now you can extend this convenience to your account.

Please read the following important information concerning your Automatic Bank Draft.

- Anyone is eligible to participate at anytime.
- Drafts will be deducted from Checking Bank account.
- Simply complete and sign the attached authorization and return it along with a VOIDED check from your checking bank account. Please allow 1 (one) month billing cycle before deduction will begin.
- Debit transmissions will be sent to the bank on the 18th of the Month to prevent any late charges. The deduction will be made from your account during this time.
- Your bank statement will reflect the date and amount of your deduction.
- You may terminate this service anytime by written notification to the town. A 1 (one) month billing cycle will apply to terminating this service.

Name: _____ Account# _____

Water Service Address: _____

Attach Voided Check Here

I authorize The Town of Salem Water to deduct my monthly payment from my checking account and make it payable to The Town of Salem Water.

Signature (as shown on bank records) _____ Date: _____

Please attach a VOIDED check with this form. Please read the above Important Information.