

**VILLAGE OF ROSEMONT
PRE-AUTHORIZED WATER PAYMENTS**

APPLICATION DATE: _____

I (We) hereby authorize the Village of Rosemont to initiate debit entries to my (our) bank account on the due date indicated on my (our) water bill for the bank and account named below.

BANK NAME: _____

TRANSIT/ABA #: _____

ACCOUNT NAME: _____

ACCOUNT #: _____

This authority is to remain in full force and effect until the Village of Rosemont has received written notification from me (or either of us) of its termination in such time and in such manner as to afford the Village of Rosemont reasonable opportunity to act on it.

CUSTOMER/RESIDENT: _____

ADDRESS: _____

PHONE NUMBER: _____

SIGNATURE: _____ DATE: _____

*****PLEASE ATTACH A VOIDED CHECK*****

FOR VILLAGE OF ROSEMONT USE ONLY

DATE RECEIVED: _____

PROCESSED DATE: _____

INITIALS: _____