MILTON MUNICIPAL UTILITIES COMMISSION

1139 SMITH STREET, MILTON, WV 25541

PHONE #: (304) 743-3422 FAX #: (304) 743-9294

miltonwater@cityofmiltonwv.com **miltonutilities@cityofmiltonwv.com**

AUTOMATIC PAYMENT DEDUCTION FORM

I authorize Milton Municipal Utilities Commission and the financial institution named below to initiate entries to my checking/savings account. This authority will remain in effect until I notify Milton Municipal Utilities Commission in writing to cancel it in such time as to afford the financial institution a reasonable opportunity to act on it. I can stop payment of any entry by notifying my financial institution and Milton Municipal Utilities Commission three (3) days before my account is charged. **Milton Municipal Utilities Commission reserves the right to cancel the automatic payment (ACH) after two payments are returned to our office for any reason.**

_____ _____

Customer's Name (Print) Customer or Representative's Name (Print)

_____ _____

Service Address MMUC Account #

_____ _____

Telephone # Alternate Telephone #

_____

Name of Financial Institution Branch

_____

City State Zip

_____ _____ Checking____ Savings_____

Account Number Bank Branch/Routing Number

_____ _____

Signature Date

Please attach a voided check from the account you wish to use. Your withdrawal date will be on the 15th Day of every month, or the next business day.