

## TOWN OF GROTON Water Department

173 Main Street. Town Hall Groton, Massachusetts 01450

Office: 978-448-1122 Fax: 978-448-1123 Superintendent: Thomas D. Orcutt

Business Manager: Lauren Crory

> Commissioners: John McCaffrey James Gmeiner Greg Fishbone

## **ACH DEBIT AUTHORIZATION**

I authorize **Eastern Bank**, on behalf of the Groton Water Department, to initiate a quarterly ACH automatic debit from my account for payment of my water/sewer charges. The amount withdrawn will be the total amount due as reflected on the billing statement prepared by the Groton Water Department. The debit entry will have an effective date of the 15<sup>th</sup> of the month during which the bill is due. In the event that this day falls on a non-business day, the effective date will be the following business day. If the ACH debit should be returned or dishonored by my bank for any reason, I understand that I will have to submit that payment along with any applicable fees to The Groton Water Department by check, cash or money order. I further understand that I can revoke this authorization through my bank and the Groton Water Department at any time with 10 days notification.

I have provided the appropriate bank information by attaching a copy of a voided check. If a savings account has been chosen, I have provided the correct account number.

Customer Name	
Water Service Account Number	
Water Service Address	
Phone Number	
Bank Name	
Bank Account Number	Type of Account
Bank Routing/Transit Number	_
Customer Signature	Date
Phone Number  Bank Name  Bank Account Number  Bank Routing/Transit Number	Type of Account

Please attach a voided check or deposit slip to this form. Personal & financial information provided herein will be kept strictly confidential.

Thank you!