



TOWN OF GROTON
Water Department
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Groton, Massachusetts 01450

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Superintendent:
Thomas D. Orcutt

Business Manager:
Patricia A. Dufresne

Commissioners:
Alvin Collins
Gary W. Hoglund
Lawrence W. Swezey

ACH DEBIT AUTHORIZATION

I authorize **Century 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 The amount withdrawn will be the total amount due as reflected on the billing statement prepared by the Groton Water Department.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 15th 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 must submit that payment along with any applicable fees to 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 a 10-day 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 Address _____

Bank Name _____

Bank Account Number _____ Type of Account _____

Bank Routing/Transit Number _____

Customer Signature _____ Date _____

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

Thank you!