

## AUTOMATIC PAYMENT SERVICE

### REQUEST FORM

Name, as it appears on water bill \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Jamestown Utilities Account No. \_\_\_\_\_

Please deduct my payment from my \_\_\_\_\_ Checking Account (attach voided check)

\_\_\_\_\_ Savings Account (attach deposit ticket)

I hereby authorize Jamestown Utilities to debit my bank account in payment of water/sewer/sanitation service at the account shown above. Drafts will be taken to our bank on the second Wednesday of each month.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Complete this form and attach a voided check or deposit ticket. You may send it in along with your Water/Sewer/Sanitation bill payment, or mail it separately to Jamestown Utilities, P O Box 587, Jamestown KY 42629.