

Watertown Charter Township Sewer Direct Withdraw Authorization Form (If you have sewer)

Name _____ Address _____ Phone _____

Sewer Account # _____ BankName _____

Routing Number _____ Account Number _____ Checking ___ Savings ___

I hereby authorize Watertown Charter Township Treasurer's Department to initiate variable entries to my (our) account described above. **This authorization is to remain in full force until Watertown Charter Township has received written notification from me of its termination in such time and in such manner as to afford Watertown Charter Township and Depository a reasonable opportunity to act on it.**

Authorizing Signature _____ Today's Date _____ E-mail _____

The quarterly sewer amount due may change. A bill will be sent to you each quarter stating the amount that will be withdrawn.

Payment will be withdrawn on the last business day of the following months: March, June, September, and December.