## STOP WRITING US A CHECK



Make Your Payment

Electronically



Save Time, Money and Postage with Automated Bill Payment Plan





6000 Industrial Dr Athens, OH 45701

Le-Ax Water District

## Le-Ax Water District

Automated Bill Payment Plan



Le-Ax Water District 6000 Industrial Dr Athens, OH 45701

Tel: 740-594-0123

## About Our Program...

How will my bill be paid?

With your authorization, we will inform your bank or credit union of the amount due. They will automatically deduct the amount from your account.

How will I know the amount of my bill?

We will send you a copy of your bill before its due date indicating the amount owed.

What if I have a question about my bill?

You can contact the Le-Ax Water District Office at 740-594-0123 just as you have in the past.

How will I know my bill has been paid?

Your next billing from us, as well as the statement from your financial institution, will show the amount paid.

When is my bill paid?

Your bill will be paid on the 15th of the month.

How do I sign up?

It's easy! Simply complete the authorization form on the right and return it to the Le-Ax Water Office.

## AUTHORIZATION FORM Le-Ax Water District Automated Bill Payment Plan

| Name   | Le-Ax Account #                                    |                                     |
|--|--|-------------------------------------|
| Service Address  |  |                                     |
| City   | State  | Zip Code                            |
| Mailing Address  |  |                                     |
| City   | State  | Zip Code                            |
| Daytime Phone Number   |  |                                     |
| Bank/Credit Union Name   |  |                                     |
| Address  |  |                                     |
| Bank Phone Number  |  |                                     |
| Account Number that we will tak  | e your payment from_                               |                                     |
| Bank Routing Number  |  |                                     |
| Name on Bank Account   |  |                                     |
| Account is a   | Savings  |                                     |
| Authorization I hereby authorize the Le-Ax Wat amount from the account listed at stand that I control my payments, like to discontinue this payment so | bove on the 15th or ne<br>, and will notify you if | ext available business day. Í under |
| O  |  | Date                                |

In accordance with Federal law, this institution is prohibited from discriminating on the basis of race, color, national origin, sex, age or disability.