

Western Monmouth Utilities Authority (WMUA)  
**Authorization Agreement for Automatic Account Withdrawals**  
For Quarterly Sewer Service Payments

WMUA account #: \_\_\_\_\_

**Check One:**

- |  |   |
|--|---|
| <input type="checkbox"/> New Authorization                             | <input type="checkbox"/> Authorization to Change to Another Bank and / or Bank Account Number |
| <input type="checkbox"/> Cancellation of Automatic Account Withdrawals |   |

I (we) hereby authorize WMUA to initiate automatic account withdrawals to my (our) checking/savings account indicated below at the bank named below. I (we) understand that this authorization will remain in effect until I (we) make a written request to WMUA to cancel the automatic account withdrawals and WMUA is afforded a reasonable opportunity to act on the cancellation request.

Bank Name _____
Routing (ABA) Number _____ Bank Account Number _____
Bank Account Type <input type="checkbox"/> Checking <input type="checkbox"/> Savings

**For checking account verification purposes, kindly attach a voided check with this application.**

Print Name(s) on Bank Account \_\_\_\_\_  
(All must sign below)

Property Location \_\_\_\_\_

Mailing Address (if different from above) \_\_\_\_\_  
\_\_\_\_\_

E-Mail Address \_\_\_\_\_

Daytime Telephone \_\_\_\_\_

Signature \_\_\_\_\_ Signature \_\_\_\_\_

Date \_\_\_\_\_

Withdrawals will be made on the 25<sup>th</sup> of the month of billing. If a weekend or holiday occurs on that day, the withdrawal will occur on the next banking day. **Please continue to submit your payments until notification appears on your bill that automatic account withdrawals are activated.**

Automatic account withdrawals will only be initiated for accounts that are not delinquent. WMUA reserves the right to terminate your participation in this payment option at any time. All insufficient funds will incur a \$20.00 fee.

WMUA will not disclose personal identifying information supplied by you on this form, as personal identifying information is deemed confidential pursuant to the Open Public Records Act, N.J.S.A. 47:1A-1, et seq.

Please mail the completed application along with your voided check to:

WMUA  
103 Pension Road  
Manalapan, NJ 07726