



**AUTHORIZATION FOR PRE-AUTHORIZED PAYMENTS**

I (we) hereby authorize PIEDMONT WATER COMPANY (“PWC”) to initiate debit entries to my (our) checking \_\_\_ or savings \_\_\_ account (select one) indicated below and the depository named below, hereafter referred to as BANK, to debit the same by such amount.

<b>Bank Name:</b>					
<b>City:</b>		<b>State</b>		<b>Zip</b>	
<b>Bank Routing No.</b>					
<b>Account No.</b>					

This authorization to draft your account will remain in full force until you notify PWC in writing to discontinue this service. PWC requires five (5) business days prior to the drafting date to discontinue service that month. Otherwise, the drafting service will be discontinued in the following month.

Name: \_\_\_\_\_

PWC Account No.: \_\_\_\_\_

Daytime Phone: \_\_\_\_\_

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

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

**PLEASE ATTACH A VOIDED CHECK IF A CHECKING ACCOUNT IS SELECTED**

**DO NOT RETURN THIS FORM WITH YOUR BILL PAYMENT**

**Please return this form in one of the following ways:**

**By mail:** Piedmont Water Company  
P.O. Box 80745  
Atlanta, Georgia 30366

**By Fax:** 404-235-4977

**Email a scanned copy to:** [customerservice@piedmontwater.com](mailto:customerservice@piedmontwater.com)