

City of Diboll Water and Sewer System

Auto Draft Authorization

The City of Diboll is pleased to offer our water customers the ability to pay water bills automatically. Eliminate worry about late payments and penalties, save time and money spent on bank checks and postage. Enrollment is easy. Complete the attached application and return it along with a voided check or deposit slip.

Confirmation Process

Once your enrollment is received, we will confirm the information you provided. During the confirmation process, you will still need to pay your bill as usual. Once confirmation is complete, your next bill will reflect a message in the Amount Due section stating that automatic payments will be deducted from your bank account. The confirmation process typically takes one billing cycle.

Payment Date

Your bank account will be debited on the due date of the bill. When you receive your water bill, please review it. If you have questions or need to discuss your bill with a customer service representative, please contact us before the due date.

Availability of Funds

If we are unable to directly debit your bank account due to insufficient funds, account closed or other problems, you will be assessed a \$35 fee in addition to any late fees or penalties. Also, your direct debit service will be terminated for this banking account.

Termination

Your auto draft will remain in effect unless we receive written notice from you 10 business days prior to the next scheduled billing date or move date. A separate application for auto draft must be completed whenever any changes are made.

Questions

If you have questions concerning this program, please call our water billing department at 829-4757.



[Auto Draft Form to Follow]



City of Diboll Water and Sewer System Auto Draft Authorization

Name: _____
(as it appears on your water bill)

Home Phone: _____ Business or Cell Phone: _____

Address: _____
City State Zip

Account(s) that you would like to be paid by auto draft:

Name of Financial Institution: _____

City State Zip

Name on Bank Account: _____
(as it appears on your bank statement)

Checking or Savings Account Number: _____

Bank Routing Number: _____

I authorize the financial institution named above to pay my monthly City of Diboll Water and Sewer System bill and to deduct each payment from my checking/savings account. This authority is to remain in effect until revoked by me in writing. I agree that each payment shall be the same as a check signed by me. I have the right to stop payment of charge by timely notification to my financial institution and the City of Diboll Water and Sewer System reserves the right to terminate this draft service (or my participation therein).

Signature

Date

****Please include this form with a voided personal check of
deposit slip**** Mail to: PO Box 340 Diboll, TX 75941