

Coplay- Whitehall Sewer Authority

AUTO PAY INFORMATION

Overview: The Coplay Whitehall Sewer Authority (CWSA) offers its sewer customers the opportunity to pay your bill via a debit to a bank account under our AUTO PAY plan. If you enroll in this plan, the amount due on your quarterly sewer bill will be automatically deducted from your checking or savings account on the CWSA due date and your payment will be transferred electronically to CWSA. An enrollment form is also on this web site along with some important information for you to review and keep.

Privacy Notice: Under CWSA's Auto Pay plan, your bank account information is strictly protected.

How it Works: After you complete the Auto Pay enrollment form, we will mail a quarterly invoice for your records approximately one month prior to the due date. But mailing a payment will no longer be necessary. On your invoice the message "AUTO PAY" will appear on your bill as a reminder.

NOTE: You must continue to make payments until "AUTO PAY" appears on your bill!

How to Enroll: If interested in enrollment in AUTO PAY, please read the items listed below and then complete the Enrollment form and mail it back to us at the address:

Coplay Whitehall Sewer Authority (CWSA) 3213 MacArthur Road Whitehall, PA 18052 610-437-4461

<u>Availability of Funds:</u> You are responsible to have enough money in your account on the CWSA due date. An insufficient amount charge will be added to your CWSA account should your transfer be returned as insufficient funds. In addition, your AUTO PAY service will be cancelled if two payments are returned for any reason in a 12 month period.

<u>Final Payment:</u> If you are participating in this payment option when your account is to be closed, your final bill must be paid mailing your final amount to CWSA.

<u>Payment Date</u>: The amount due for payment will be transferred from your account on the CWSA due date. You will receive a bill in the mail about 30 days prior to the due date. Once AUTO PAY is set up on your account the invoice will be only for your record keeping.

<u>Termination</u>: This authorization will remain in effect until your service is terminated. You may terminate this authorization via verbal or written notice to CWSA. Cancellation will occur 7 days after notice is received.

<u>Account/Address Change:</u> Please let CWSA know of any change in account number or address as soon as possible to avoid missed payments.

Record of Payment: Your automatic transfer will show up on your bank statement as proof of payment.



Coplay- Whitehall Sewer Authorit

AUTOMATIC PAYMENT (AUTO PAY) ENROLLMENT FORM

Please read the AUTO PAY information that is attached to this form.

Authorization Agreement for Pre-Authorized Payments

- Complete the form below and mail to CWSA, 3213 MacArthur Road, Whitehall, PA 18052
- If you prefer you can mail this form with your next sewer payment; however, the enrollment in the AUTO PAY will not take effect until the next quarterly invoice, so a payment must be included when you send in the form to enroll.
- All information must be completed or the form will be returned to you. Print legibly and clearly.
- If you are signing up for AUTO PAY using a checking account, remember to include a blank check marked VOID along with the enrollment form.
- If you are signing up for AUTO PAY using a savings account, contact your bank to obtain an ABA routing number and include that number on the form with your account number.
- If you are signing up for AUTO PAY using a credit union account, contact your credit union to obtain an account number in ACH format.

Yes, I want to enroll in AUTO PAY and have my quarterly SEWER rental payments deducted automatically from the account associated with the enclosed check, on the CWSA due date.

CWSA Customer #	Example (01-200000-00)	
Customer Name on Account		
Name of Depositor	(if different than custo	mer)
Service Address	City	
Phone Number:		
Type of Account: Checking (enclose voided of	check) Savings	
Account number of bank account		(9 digit #)
I authorize and instruct my financial institution to deduct the amount of my quarterly sewer bill from my checking account and remit directly to CWSA. I agree that each charge to my account shall be the same as if I had signed a check to pay the bill. CWSA will notify the financial institution of the amount to be deducted. I understand that if at any time I decide to discontinue the AUTO PAY Option, I must notify CWSA. I understand and agree that CWSA is not liable in any way for erroneous bill statements or incorrect debits to my accounts and that should an error in the bill statement occur, CWSA's only responsibility is to correct it when and if it receives notice from me of the error. I understand that my financial institution and CWSA reserve the right to terminate this payment option and/or my participation. Customer's participation is subject to CWSA's approval.		
Signature		Date

^{**}Once AUTO PAY is established an "AUTO PAY" note will appear on future invoices.