



By signing below, I understand the following statements:

- ✓ Blair Water Conditioning of Tampa Bay has my permission to initiate debit entries from my choice of checking account or savings account (indicated below). I have enclosed a VOIDED check from that checking account. I understand that I will no longer be receiving paper statements upon enrollment of the ACH program.
- ✓ I understand that payments will be drafted from my account **every 4 weeks** (to coincide with current billing and service schedule).
- ✓ This authorization is to remain effective until Blair Water Conditioning receives written notice from me to terminate the transactions.
- ✓ I have satisfied any previous balance by payment of handwritten check before I begin the ACH payment program.

Customer Name: _____

Service Address: _____

Bank Name: _____

Circle One: Checking Account Savings Account

Routing Number: _____

Account Number: _____

E-mail address: _____ Amount: _____

Signature: _____ Date: _____

Please send completed form and voided check (not deposit slip) to:
Mail: Blair Water Conditioning of Tampa Bay, Inc. 131 Vollmer Ave., Unit #2, Oldsmar, FL 34677