



**Roamingwood Sewer and  
Water Association**

## Introducing the Roamingwood Sewer-Water's Direct Debit Payment Program... Paying your sewer-water bill couldn't be easier!

Dear Association Member:

The Roamingwood Direct Debit Payment Program allows you to set up direct quarterly payments from your checking or savings account to cover your water and sewer charges. Your account will be paid on time and you will never find a **Past-Due Notice** (with associated penalty-interest charges) in your mailbox!

If the Roamingwood Direct Debit Payment Program is of interest to you, please complete the attached application form. Include a voided check for automatic payment from your checking account; or, include a deposit slip for automatic payments from your savings account.

Your completed application and bank voided check or deposit slip should be returned to:

Roamingwood Sewer & Water Association  
P.O. Box 6  
Lake Ariel, PA 18436

If you have any questions regarding this free payment option, please contact our office at 570-698-6162, during the business hours of 8:30 a.m. – 4:30 p.m.

Roamingwood Sewer & Water Association

**ACH DEBIT Authorization for Electronic Transactions for  
ROAMINGWOOD SEWER AND WATER ASSOCIATION  
P.O. BOX 6  
LAKE ARIEL, PA 18436**

Customer Account No.: \_\_\_\_\_

Customer Name: \_\_\_\_\_ Telephone No: \_\_\_\_\_

Customer Address: \_\_\_\_\_

City, State & Zip: \_\_\_\_\_

Current financial institution where your account is maintained:

\_\_\_\_\_  
Name of financial institution

\_\_\_\_\_  
Address of financial institution

Bank Routing No.: \_\_\_\_\_ (Between these symbols 1: 1: on the bottom left of your check)

Bank Account No.: \_\_\_\_\_

Type of Bank Account: \_\_\_\_\_ Checking or \_\_\_\_\_ Savings

Single Account Ownership: \_\_\_\_\_

Joint Account Ownership: \_\_\_\_\_  
(Please list all individuals whom have ownership for the account)

A **VOIDED** check or a savings deposit slip drawn on the account to be debited is to be attached to this Authorization upon sign up.

I (we) hereby authorize Roamingwood Sewer and Water Association, hereinafter call ASSOCIATION, and its originating depository financial institution (ODFI), to initiate DEBIT entries to my (our) checking / savings accounts maintained at the financial institution listed above, hereinafter called DEPOSITORY, and, if necessary, initiate adjustments for any transactions credited /debited in error. This authority is to remain in full force and effect until the ASSOCIATION has received written notification from me (or either of us) of its termination in such time and in such manner to afford the ASSOCIATION and DEPOSITORY a reasonable opportunity to act on it.

**DATE:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

**AUTHORIZED  
SIGNATURE:** \_\_\_\_\_

**AUTHORIZED  
SIGNATURE:** \_\_\_\_\_

**PRINT NAME:** \_\_\_\_\_

**PRINT NAME:** \_\_\_\_\_

***Note:*** *In the case of revoked authorization, all written authorizations must be revoked only by notifying the COMPANY in writing no later than 15 days before the next transaction effective date.*