AUTOMATED PAYMENT PROGRAM

PUBLIC WATER SUPPLY DISTRICT #3 OF FRANKLIN COUNTY

Public Water Supply District #3 of Franklin County is offering a bank draft program available to customers choosing to have their monthly water bill automatically deducted from their bank account.

The program will save customers the cost of postage and checks, eliminates monthly check writing, and provides a record of payment on the customer's bank statement. Additionally, customers will continue to receive their monthly bill through the mail, as a method to inform the customer of their water usage.

For those customers interested in taking advantage of this benefit, please complete the AUTOMATED PAYMENT AUTHORIZATION FORM enclosed and provide an unsigned, voided check.

Following customer sign up for the program, it will take PWSD #3 approximately 6 weeks to initiate the program with the corresponding bank. During the start up period, the customer will continue to receive water bills for payment. Once the initiation is complete, the customer's utility bill will have "PAID BY DRAFT" printed on the bill.

PWSD #3 will draft the payment for the water bill from the bank account on the due date of the utility bill. The customer will continue to receive the monthly utility bill at the regular time.

Should a customer wish to discontinue participation in the AUTOMATED PAYMENT PROGRAM, the customer must provide written notification of their wish to terminate the AUTOMATED PAYMENT AUTHORIZATION PROGRAM to the PWSD #3 office at PO Box 160, 150 Old Highway 100, Villa Ridge, Missouri.

For more information, please call (636) 742-5200.

AUTOMATED PAYMENT AUTHORIZATION FORM

PWSD #3 OF FRANKLIN COUNTY, MISSOURI

I (we) hereby authorize Public Water Supply District #3 of Franklin County, herein called District, to initiate debit entries to my (our) *(select one)*

Indicated below and the depository named below, herein called Depository, to

[] checking account

[] savings account

| account to collect amounts du | derstand that the District will debit the below listed up for water and/or sewer utility services. I (we) at Funds (NSF) fee may be charged, as allowed by a returned for any reason. |
|-------------------------------|---|
| Bank Depository Name | |
| City | , State |
| Transit ABA # | Bank Acct # |
| have received written notific | ull force and effect until the District and Depository ation from the person(s) listed below, of this I in such manner as to afford the District and |
| Customer Name(s) | |
| Service Address | |
| Customer Drivers License #(s) | |
| Phone #: | |
| | |
| Signature(s) | Date |
| | Date |

Please enclose a VOIDED CHECK with this form. Thank You.