TWIN LAKES REGIONAL SEWER DISTRICT

"Protecting the Environment Today for Tomorrows Generations"

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DIRECT WITHDRAWAL

- You must complete the form to add, change or delete withdrawal information. 1)
- No verbal changes will be accepted all changes must be in writing. 2)

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	CHE	CK ONE:	•	
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		Cancel Account		a .
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	Institution Nan	ne:		
Account Type				·
☐ Checking	Institution Acc	ount #:	1	
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	(First 9 digits	s only)	· · · · · · · · · · · · · · · · · · ·	
	Institution pho	ne number:		_
authorize Twin Lakes 1				
institution. This author	ity will remain	in force until I have	given written notic	e that I have
terminated it. I understa	ind that I must	give advance notice	to allow reasonable	time for m
instruction to be executed	••			
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Name (pinn).				
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A voided check must be s to submit an ACH/Auto month for testing and	submitted with A Withdrawal Payn then the ACH/A	CH/Automatic Withdinent form for current uto Withdrawal Pay	month billing will be ment will be active	the 1st of th
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