



LITTLE HOCKING WATER ASSOCIATION, INC.

3998 Newbury Rd, PO Box 188

Phone 740.989.2181

Little Hocking OH 45742

Fax 740.989.5543

www.littlehockingwater.org

AUTOMATED CLEARINGHOUSE FORM

(Enrollment for Reoccurring Bill Payment)

Little Hocking Water Account No: _____

Name: _____

Billing Address: _____

City/State/Zip: _____

Contact Number: _____

I Authorize Little Hocking Water Association, Inc. to deduct my direct payment from my bank account.

Name of Bank/Savings & Loan/Credit Union:

Checking (Circle One) Routing Number: _____

Savings Account Number: _____

I authorize Little Hocking Water Association, Inc. to deduct my utility payment from the account listed above. I understand that if I decide to discontinue this payment plan, I will immediately notify Little Hocking Water Association, Inc. in writing at the following address:

LITTLE HOCKING WATER ASSOCIATION, INC.
P.O. BOX 188
LITTLE HOCKING, OH 45742

SIGNATURE: _____ DATE: _____

Please enclose a voided check with this form