



Public Works Department

WATER AND WASTEWATER SERVICES / Business Operations Division

2555 West Copans Road • Pompano Beach, Florida 33069 • 954-831-3250 • water@broward.org

Direct Debit Authorization Form

I hereby authorize Broward County Water and Wastewater Services (WWS) to automatically withdraw funds from my bank account (shown below) each month, to pay my utility bill on the due date shown on the bill. If the payment due date falls on a weekend or holiday, I understand that the withdrawal may be executed on the next business day. This authorization will remain in effect until WWS receives a written notice from me regarding changes to the banking information provided or terminating this authorization, at least 15 days prior to the next billing date. I also acknowledge that I am still responsible for payment of my bill by the due date after termination of this authorization. I understand that WWS reserves the right to terminate my participation in this payment option after 2 automated withdrawals are declined by my bank within a 12 month period and the account can be placed on 'Cash Only' status for one year. I understand that a returned item fee will be charged by WWS for all withdrawals declined by my bank due to insufficient funds or account changes, and the fee will be based on the amount of the declined transaction.

Please complete the information below sign and date th form:

WWS Account Name

WWS Customer #

Service Address

Phone #

City, State, Zip

Email Address

I would like to receive an electronic bill instead of a paper bill? Yes No

Account Type: <input type="checkbox"/> Checking (Voided check attached) <input type="checkbox"/> Savings (Obtain Account & Routing Number from bank)	
Name on Account _____	
Bank Name _____	
Bank Routing # _____	
Bank Account # _____	

By printing my first and last name in the signature field below I am confirming that the information provided is current and accurate. This form will be submitted to a secure internal document management system for processing.

SIGNATURE _____

DATE _____