

SCOTT TOWNSHIP AUTHORITY

350 Tenny Street
Bloomsburg, PA 17815
Phone: (570) 784-6639 - Email: stablmpa@gmail.com

Auto Draft Authorization Form

How do I sign up?

Auto Draft payment is a free service offered by Scott Township Authority. Complete a signed authorization form and return with a voided check. If you don't use checks or opting to use your savings account, we accept a dated verification notice on bank letterhead from your financial institution. PLEASE NOTE: All forms will **NOT** be accepted without provided proof of financial institution.

How do I know the amount of my bill and the payment date?

Your due date will not change. You will continue to receive your monthly bill showing the due date and amount of your payment. A message will print on your bill as "Drafted- Do Not Pay"

What if I do not have sufficient funds on the payment date?

It would be just the same as if you had written paper checks without sufficient funds. A \$25 fee will be assessed along with a 15% late charge on your sewer balance. These fees are easily avoidable, please contact the office as soon as financial changes occur.

EFFECTIVE MAY 1ST 2026 PENALTY RATES WILL BE INCREASED TO 15% CHARGE

What if I disagree with a bill or want to discontinue my automatic bill payment service?

Contact Scott Township Authority at least 10 days prior to the due date on the bill. The Authority cannot make changes to the debit file after it is issued to the bank. Do not wait, please contact the Authority right away.

CUSTOMER INFORMATION

Name: _____ Daytime Phone # _____

Service Address: _____

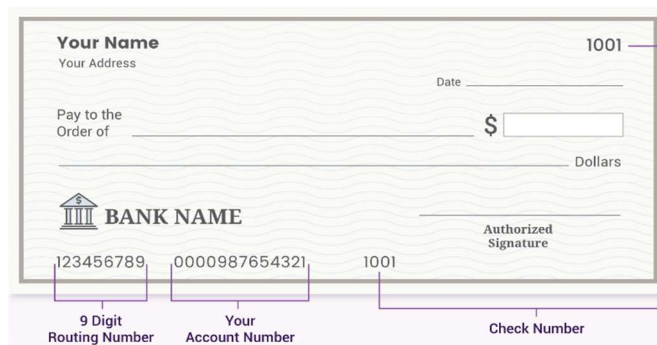
Mailing Address: _____

8-Digit Sewer Acct #: _____ Email: _____

Check one: Checking Savings

Must include a voided check or deposit slip with this form

Name of Bank _____ Bank Phone # (____) _____



Bank Routing# _____ Bank Acct # _____

I authorize the Scott Township Authority to direct my financial institution to make my monthly sewer service payments from the account specified above on the invoice due date. This authorization will remain in effect until I or my financial institution provide written notice of termination to the Scott Township Authority, allowing sufficient time for them to act on it, if the property has sold, or if there is a written notice of termination from the Scott Township Authority.

Customer Signature _____ Date _____

Office Use Only: Date Received _____ Initials _____ Eff Date _____