

Authorization for CREDIT CARD PAYMENTS

To set up automatic CREDIT CARD payments, please complete this form and return to Aurora-Brule Rural Water System, Inc., PO Box 140, Kimball, SD 57355

I authorize AURORA-BRULE RURAL WATER SYSTEM, INC ("COMPANY") to electronically debit my CREDIT CARD as follows:

Credit Card _____ Visa _____ Mastercard _____ Amex _____ Discover (check one)

Cardholder Name _____

Account Number _____

Expiration Date _____

Number of and/or frequency of debits: __EACH MONTH ON THE 20TH (OR NEXT WORKING DAY) __

Authorized debit amount: __AMOUNT BILLED _____

I understand that this authorization will remain in full force and effect until I notify AURORA-BRULE RURAL WATER SYSTEM, INC., in writing, by phone, or in person at the Water office that I wish to revoke this authorization. I understand that AURORA-BRULE RURAL WATER SYSTEM, INC., requires at least 5 days prior notice in order to cancel this authorization.

Name(s): _____
(Please Print)

Date: _____ Signature(s): _____

Phone Number: _____

Account Number(s): _____

NOTE: To catch leaks, we ask that you review your monthly bills as we do not know what "normal" usage is for you.

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