

# Rock Creek Public Sewer District

BOARD OF TRUSTEES

ALFRED BARBAGALLO  
ROGER VAIL  
ERIC KNOLL  
TIM HOLLERBACH

JEFFERSON COUNTY, MISSOURI  
P.O. Box 1060 • Imperial, MO 63052  
4133 W. Outer Rd. • Arnold, MO 63010

www.rockcreekpsd.com

Phone: 636-464-3305  
Fax: 636-464-2196

DONALD DANIEL  
District Administrator

Dear Customer,

Rock Creek Public Sewer District will be offers Automatic Payment on a monthly basis, in addition to quarterly drafts. This will enable you to make your sewer payment directly from your checking account on the 15<sup>th</sup> of the month. By signing up for Automatic Payment you will:

- *Free yourself of check writing*
- *No checks being lost or delayed in the mail which could cause late fees*
- *Have a record of payment on your bank statement*
- *Save on postage and cost of checks*
- *Make payments even when you're on vacation or out of town*

To enroll in the automatic payment program, just fill out the information below and return to:  
Rock Creek Public Sewer District  
Post Office Box 1060  
Imperial, MO 63052

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## Please enroll me in the Automatic Payment Program

Name \_\_\_\_\_ Phone# \_\_\_\_\_

Address \_\_\_\_\_

(Circle one)  
Quarterly \$ \_\_\_\_\_ Monthly \$ \_\_\_\_\_

CHK Acct # \_\_\_\_\_  
(Circle one)  
Checking Savings

### \*PLEASE ATTACH VOIDED CHECK FROM ACCOUNT TO DEBITED FOR YOUR SEWER PAYMENT

I authorize Rock Creek Public Sewer District to charge my sewer payment to my bank account number shown above. I understand that the funds will be withdrawn on the 15<sup>th</sup> day of the month, either monthly or quarterly and that it is my responsibility to ensure funds are in my account at that time.

I understand that I will receive my bill as usual notifying me of the amount to be withdrawn from my account on the 15<sup>th</sup> of month, quarterly payments only, monthly payments will be set amounts with the last month adjusting to a zero balance.

This authority will remain in effect until I instruct Rock Creek Public Sewer District to cancel or change it. Future authorizations must be in writing and must be received by Rock Creek Public Sewer District 15 days prior to the effective date of change. I also understand that if my payment is returned, Rock Creek Public Sewer District will charge a \$30.00 fee that can be added to payment amount and deducted from the above account the following week. I acknowledge that the origination of ACH transactions to my account must comply with the provision of U. S. law.

Signature \_\_\_\_\_ Date \_\_\_\_\_