**Chilton Water Authority**

**P.O. Box 1029**

**Thorsby, AL 35171**

**205-646-3300 Fax: 205-646-4121**

# Recurring Credit Card Form

Fill out completely and return this form thru mail, fax or drop it by our office. You will still receive a bill EVERY MONTH. This is to let you know the amount of your bill. If you have any more questions on the Bank Drafting call our office at 205-646-3300.

# CREDIT CARDS ARE PROCESSED AT CWA ON THE 10THor 25th OF EACH MONTH

CWA's Account: ------

Rt/Sq: \_

Date: ------

Customer Name: Service Address: Customer Billing Address: Customer Phone#:

·

Credit Card Type: Credit Card#:

Visa

MasterCard

Discover

Expiration Date (mm/yy): /

Address where Credit Card goes to: Print Name as it appears on the Credit Card: Authorized Signature as it appears on the Credit Card: \_

Print Name if Different from name on Credit Card: --------------

Signature if Different from name on Credit Card: ---------------

Any changes, such as expiration date must be updated immediately to avoid a return and added return fee and non payment fee.