

Valley View Water Association, Inc. (VVWA)

Automatic Bank Draft Program

Automatic payment from your checking or savings account assures your bill is paid in full and on time every month, even if you are out of town. This convenient, efficient, and cost-effective process is offered by Valley View Water Association, Inc. (VVWA).

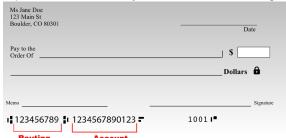
How do I begin the process?

To become an automatic payment customer, two items are required: 1) Complete the Automatic Bank Draft Form on the next page and 2) Send form to:

Valley View Water Association, Inc.

C/O 5310 Ebony Place Piedmont, SD 57769

If preferred, forms may also be emailed to sagewaterworks100@gmail.com.



When will my payment be withdrawn from my account?

Please continue to pay your bill as normal until your bill states "Automatic Payment-Processed 20th - 25th of each month". After enrollment in the program, the exact amount of your bill will be withdrawn from your account. Automatic payment dates must correspond with the business days of the financial institutions so a 5-day window is necessary.

What happens if I have questions about my bill?

If you have a question about your bill, please email sagewaterworks100@gmail.com or call Marilee, Biller, at 605-431-2006

What happens if there is not enough money in my account?

The automatic payment will be presented to your financial institution once for processing. If your financial institution does not pay the automatic payment request because of insufficient funds and returns it to VVWA's financial institution, your account will be charged an insufficient funds fee according to the VVWA's rate/fee schedule and processed in the same manner as an insufficient funds check.

How do I cancel my participation?

If you decide to discontinue participation in the automatic bank draft program, email sagewaterworks100@gmail.com, or by calling Marilee at 605-431-2006.

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Please complete the following in	nformation:		
Customer Name: (billing account)			
Water Service Address:		Lot #	_
Bank Name:	City	State	_
Checking* □ Savings □			
Bank Routing Number:			_
Account Number:			_
Valley View Water Association, Inc. (Vother associated charges as appropria understand that this authorization is in service, allowing VVWA reasonable tir are necessary, they will be reflected or account will be processed by my finant that I may be charged insufficient functions for the service of the ser	ate on or up to 5 days prior to the a effect until VVWA is notified that me to act upon my notification. I an the next billing. I understand that institution and VVWA in the second second institution and VVWA in the second ins	monthly due date of my and an authorized personals understand that if contact non-payment due to instance manner as an insuf	account. I further n no longer desires this rrections to my account sufficient funds in my ficient funds check, and
Signature*	Date		
*person shown on billing account			