

ELECTRONIC SEWER PAYMENT (ESP)

Telephone: 618.234.0044

Fax: 618.234.0222

Village of Swansea
1400 N. Illinois Street
Swansea, IL 62226**ELECTRONIC SEWER PAYMENT APPLICATION**

I hereby authorize the Village of Swansea to instruct the financial institution indicated on this form to make my sewer bill payments as they become due from the account listed below. I acknowledge that the origination of ACH transactions to my account must comply with the provisions of U. S. law. I understand that I am in full control of my ELECTRONIC SEWER payments. I may discontinue enrollment at any time with written notice 30 days in advance to the Village of Swansea. Both the Village of Swansea and the financial institution listed reserve the right to terminate this payment plan and/or my ACH participation.

Customer Name (Please print)_____
Sewer Account Number_____
Sewer Address Location_____
Daytime Telephone Number_____
Financial Institution_____
Bank Account Number Checking Savings_____
Signature_____
Date**Please complete this form and enclose it with a "voided" check or photocopy, and return it to the Village of Swansea.**