



**Water Department**

**Water/Sewer E-Bill Authorization Form**

www.thomastwp.org

**CUSTOMER NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**ACCOUNT NUMBER: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**SERVICE ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**EMAIL ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

*Please read and acknowledge this important information regarding your water/sewer bill delivery method.*

**Terms and Conditions**

* By completing this enrollment form, you are choosing to receive your Thomas Township Water/Sewer Bill electronically and will **not** be receiving a bill by mail.
* You have the right to withdraw this consent at any time by contacting the Water Department at 989-781-0150 or by email at **watersewer@thomastwp.org** .
* Once enrolled in the electronic E-Bill program, you are responsible for ensuring receipt of the email. Thomas Township will email your bill to the email address you provide. If you fail to receive it, you are still responsible for all charges on the account by the due date. If payment is received after the due date, penalties will apply. In order to ensure that we are able to provide you with accurate billing information, **you must update us with any change in your email address**. Thomas Township cannot ensure electronic delivery of your water/ sewer bill.
* All electronic bills can be printed out and saved electronically to your computer for your records.
* If you use spam filters for emails, please add the Thomas Township to your approved senders list, **ThomastwpUB@gmail.com****.**

**I have read and understand the Terms and Conditions, and by signing below, I authorize Thomas Township to send utility bills for this account to my email address.**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 *OWNER’S SIGNATURE PHONE NUMBER DATE*

**Return completed form to: Thomas Township Office**

 **249 N. Miller Road**

 **Saginaw, MI 48609**

 **Phone: 989-781-0150, Fax: 989-781-0290**

 **Email:** **watersewer@thomastwp.org**