

**PALMER PLANTATION MUD #2**

3134 CARTWRIGHT RD. • MISSOURI CITY, TEXAS 77459

PHONE: 281-499-5539 • FAX#: 281-261-4507

**ELECTRIC FUNDS TRANSFER (EFT) • CREDIT CARD FORM**

*Fill out this form* if you would like to sign up for a **monthly deduction** from your **Bank account** or **Credit Card**.

**ELECTRIC FUNDS TRANSFER (EFT)**

I authorize Palmer Plantation Mud #2 to initiate variable monthly debit entries to my bank account. If I have any changes to my bank account, I agree to contact the office at least 10 days before the due date to allow time to input the correct data into the system. You will continue to receive a utility bill each month for your records only.

*-- Please include a pre-printed voided check along with your payment. --*

(Account will be drafted approximately 3 days prior to the due date.)

**Checking Account**                      Signature: \_\_\_\_\_  
 **Savings Account**                      Joint Signature: \_\_\_\_\_  
Date: \_\_\_\_\_

**CREDIT CARD PAYMENT:** \*\*A 3% processing fee will be charged for credit card payments\*\*

This payment will be:  **Monthly** (Card will processed approximately 3 days prior to the due date.)

Type of credit card:  **Discover/Novus**     **Visa**     **Master Card**

**Credit Card Number:** \_\_\_\_\_ **Expiration Date:** \_\_\_\_\_ (    )  
MO                      YR                      CVV2  
**Signature:** \_\_\_\_\_  
**Date:** \_\_\_\_\_

I authorize Palmer Plantation Mud #2 to initiate variable monthly debit entries to my credit card. If I have any changes to my credit card, I agree to contact the office at least 10 days before the due date. This will allow time to input the correct data into the system. You will continue to receive a utility bill each month for your records only. A convenience fee will be assessed through a third party service provider. The fee will appear as a separate line item on your statement.

**Customer Name:** \_\_\_\_\_  
**Service Address:** \_\_\_\_\_  
**Phone Number:** \_\_\_\_\_  
**Account Number:** \_\_\_\_\_  
**Effective Month for Service:** \_\_\_\_\_

**For Office Use Only**  
\_\_\_\_\_  
\_\_\_\_\_  
**Excepted by:** \_\_\_\_\_  
**Date posted:** \_\_\_\_\_