

Recurring Payment Authorization Form

Bank Transfer | Form # 001

Please print as legibly as possible!

If you would like to enjoy the convenience of automatic recurring billing, or AutoPay, simply complete and sign this form. All requested information is required. Upon approval, we will automatically withdraw from your bank account for the amount and frequency indicated below. You may cancel this automatic billing authorization at any time by contacting us at least 30 days prior to the next billing cycle. *

Customer Bank Account Information:

Name on Bank Account: _____

Mailing Address: _____ Zip Code: _____

Account Type: ☐ Checking ☐ Savings

Routing Number: _____ Account Number: _____

Bank Name/Branch: _____ Customer Phone #: (_____) _____ - _____

Choose your preferred billing cycle:

*Our default billing cycle is on a bi-monthly basis, but you may choose a different frequency if it is preferred.

Frequency: ☐ Monthly ☐ Bi-Monthly (2 Mos) ☐ Quarterly (3 Mos) ☐ Semi-Annually (6 Mos) ☐ Annually (12 Mos)

Terms of Billing:

Beginning on _____, I authorize Jerry's Sanitation [Bailey Service LLC] to electronically debit my bank
mm/dd/yy
account for the total balance due on my account and in the frequency as it is marked above.

This payment authorization is to remain in effect until I notify Jerry's Sanitation of its cancellation by giving adequate notice within 30 days of the next billing cycle. I acknowledge that electronic debits against my account must comply with United States law.

* Billing cycles begin on the 25th of each month, and end on the 24th of the following month.

Customer Signature

Customer printed name

Date