

DERRY TOWNSHIP MUNICIPAL AUTHORITY

P.O. BOX 250
NEW DERRY, PENNSYLVANIA 15671

PHONE: (724) 694-2513
FAX: (724) 694-6156

Application for Automatic Bill Payment

NOTE: This application covers monthly sewage payments **ONLY**

Account Name: _____ Date: _____

Billing Address: _____

Service Address: _____

Phone Number: _____ Alt. Number: _____

Your Bank's Name: _____

Your Bank's Phone No: _____

Your Bank's Routing No: _____

Your Bank Account Number: _____

Sewage Account Number: _____

Deduct from: Checking or Savings (Please check one box only)

Signature: _____

Payment will be deducted from your designated account on the 4th 5th or 6th (due date).
You will receive a billing postcard advising of the amount and date of the deduction.
A copy of a check for the aforementioned account must accompany this form.

Copy of Check

In accordance with Federal Law and U.S. Department of Agricultural Policy, The Derry Township Municipal Authority is prohibited from discriminating on the basis of race, color, national origin, sex, religion, age and disability. To file a complaint of discrimination, write U.S. Department of Agriculture, Director, Office of Adjudication, 1400 Independence Avenue, SW, Washington, DC 20250-9410, or call (866) 632-9992 (to request a form). DTMA is an equal opportunity provider and employer.