



Seneca Light & Water Plant  
P.O. Box 4773  
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Seneca, South Carolina 29679  
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Patsy Hart  
Billing Supervisor

Rita Swaney  
Asst. Billing Supervisor

### AUTOMATIC CREDIT CARD DRAFT AUTHORIZATION FORM

DATE \_\_\_\_\_

CUSTOMER NAME \_\_\_\_\_

CUSTOMER ACCOUNT \_\_\_\_\_

CYCLE \_\_\_\_\_

PHONE NUMBER \_\_\_\_\_

I HEREBY AUTHORIZE SENECA LIGHT & WATER TO CREDIT MY MONTHLY UTILITY BILL ON MY CREDIT CARD AS LISTED BELOW.

I UNDERSTAND THAT IT IS MY RESPONSIBILITY TO NOTIFY SENECA LIGHT & WATER OF ANY CHANGES TO THE INFORMATION IN THIS FORM. DUE TO OUR INCREASING WORKLOAD, WE ARE UNABLE TO CALL FOR ANY UPDATES.

I ALSO UNDERSTAND THAT DECLINED CARDS WILL BE TREATED THE SAME AS A RETURNED CHECK.

AFTER 2(TWO) PAYMENTS ARE DECLINED, YOU WILL BE TAKEN OFF DRAFT TO AVOID FURTHER FEES.

IT IS YOUR RESPONSIBILITY TO RE-INSTATE THE ACCOUNT.

SIGNED \_\_\_\_\_

VISA \_\_\_\_\_ MASTERCARD \_\_\_\_\_

CARD # \_\_\_\_\_

EXPIRATION DATE \_\_\_\_\_