



Automatic Credit Card Authorization

ACC #

1. Name on Card

First Name

Middle Initial

Last Name

2. Card Number:

3. Expiration Date

Month/Year

CVC Number

Security Code

That the business may communicate with me electronically at the email address and/or phone number listed below.

4. Most Preferred Method of Communication:

☐ Text Message

☐ Email

5. Contact Information

My Email and Phone Number

I can withdraw my consent to electronic communications by calling / emailing:

Tri- Community Water Supply Corporation

(512) 488-2573

tricomcommunitywater@gmail.com

I agree to a \$2.50 + 3.99% charge in addition to my monthly bill statement.

7. Signature

Date of Signature

MM

DD

YY