Tropix
The Pool Service People

AUTO-DEBIT (ACH) PROGRAM (Auto-charge also available)

This Auto-Debit Program will not begin until Tropix Pools has received this completed form along with an **attached voided check or savings deposit slip**.

Your account will be debited on or close to the first of each month for cleaning service. Also, any charges throughout the month will be debited as they are invoiced. You will still be sent a copy of each invoice and a monthly statement.

This form must be completed, signed and returned to us by mail or fax (972.276.2227).

If you should have any questions regarding your account or the Auto-Debit Program (ACH), feel free to contact us at 972.276.2222 or by e-mail at billing@tropixpools.com.

I (we) hereby authorize Tropix Pools to initiate variable entries to my (our) *(check one)*

❑ Checking ❑ Savings Bank Acct #:_____

Bank Routing #: _____

Financial Institution Name: _____

Financial Institution Address: _____

Signature: _____ Date: _____/_____/_____

(Second signature (if joint acct.): _____)

Full name (print): _____ Home ph: (_____) _____ - _____

Home address: _____

City: _____ Zip code: _____

Tropix Pools account number (if known)_____ Email:_____

In the event that the ACH is returned due to insufficient funds, a fee of $5 per ACH will be added to your account balance.

Attach a voided check or savings deposit slip. This authority is to remain in full force and effect until Tropix Pools has received written notification from me of its termination in such time and manner as to afford Tropix Pools a reasonable opportunity to act on it.

2905 Forest Lane Garland, TX 75042
972.276.2222 FAX: 972.276.2227 www.TropixPools.com
Cleaning • Repairs • Remodeling