

Commercial Pest Control's Direct Pay Enrollment Form

Selection of Commercial Pest Control's Direct Pay authorizes a direct debit payment to Commercial Pest Control for recurring fees under your Subterranean Termite Bait Service Agreement and/or your Gold Account Pest Control Service Agreement. The Only prerequisite is your existing account must have a zero balance.

Customer Number: _____

Email (if available): _____

Please provide the information below as it appears on your chosen financial institution's statement:

Name: _____

Address: _____

City, State, Zip Code: _____

I hereby authorize _____

(print name of financial institution chosen for direct deposit)

to make automatic debit withdrawals in payment of my recurring fee obligations described in my Subterranean Termite Bait Service Agreement and my Gold Account Pest Control Service Agreement. Payment will go to Commercial Pest Control from the following checking or credit card account I have chosen: (check one)

Option 1 – Checking Account Transfer
(voided check must be attached)

(Deposit slips often do not contain enough information to allow automatic payments to process.)

Option 2 – Automatic Credit Card Charge
____ American Express ____ Visa
____ MasterCard ____ Discover

Credit Card Number
____/____/____/____
Expiration Date – MM ____ DD ____ YY ____

I understand that my account will be debited/charged on the first working day of each month. I also understand that once I have chosen this option my account will remain this payment type for the duration of my contract with Commercial Pest Control.

Customer Signature _____ Date ____/____/____

Commercial Pest Control Representative: _____ Date ____/____/____

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PEST CONTROL**
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