



# Department of Water & Sewerage

City of Shreveport

Bank or Credit Union	Checking Account # (Attach A Voided Check)	
Bank City and State	Bank Routing Number	
I have given authority to DOWAS to draw against my checking account for payment of my water bill services. You are authorized to pay such a draft when so drawn and presented for payment until this authority is revoked.		
Signature (As accepted by Bank or Credit Union)	Date	
DOWAS Customer Name	DOWAS Customer Address	
DOWAS Account Number(s)	Last four of SSN	Telephone Number

DOWAS  
 Attn: Customer Service  
 P. O. Box 30065  
 Shreveport, LA 71153  
 318-673-5510 Phone  
 318-673-7603 Fax  
 custsvc@shreveportla.gov



Authorization  
 Agreement  
 For Automated Water

&

Sewerage Bill  
 Payment.

