



## UTILITIES AUTOMATIC BANK DRAFT AUTHORIZATION FORM

### Customer / Account Holder Information

- Full Name: \_\_\_\_\_
- Service Address: \_\_\_\_\_  
City, State, ZIP: \_\_\_\_\_
- Mailing Address (if different): \_\_\_\_\_
- Phone Number: \_\_\_\_\_
- Email Address: \_\_\_\_\_
- Utility Account Number: \_\_\_\_\_

### Bank Account Information

- Bank Name: \_\_\_\_\_
- Account Holder Name: \_\_\_\_\_
- Account Type: ☐ Checking ☐ Savings
- Routing Number: \_\_\_\_\_
- Account Number: \_\_\_\_\_

### Authorization Agreement

I authorize the **City of Walton** to initiate automatic electronic withdrawals from my bank account for payment of my utility services. This authorization will remain in effect until I provide written notice of cancellation, subject to applicable utility and banking regulations. I understand that sufficient funds must be available at the time of withdrawal. If funds are not available in your account on the due date, and the ACH is returned to us, it will be processed as a returned check and a \$35 fee will be added on.

### Customer Authorization

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Date: \_\_\_\_\_

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### For Office Use Only

Date Received: \_\_\_\_\_

Processed By: \_\_\_\_\_