



FORM 20 - AUTHORIZATION TO DRAFT ACCOUNT

AUTHORIZATION TO DRAFT ACCOUNT

I, _____, residing at _____

authorize the City of _____ to draft my (Savings/Checking) Account No. _____

in order to make the monthly payment of my CITY OF _____ Utility Bill. Payment amount may vary from month to month depending on usage. (This authorization will remain in effect until revoked by you, your financial institution, or the City of _____.)

The City of _____ will continue to send you a monthly billing statement. This statement can act as your receipt of payment, showing the exact amount that will be deducted from your account on the 5th due date each month.

I understand that if funds are not available in my account, or the payment is rejected by my banking institution, that I will be:
 Charged a penalty,
 Be charged a service fee same as an insufficient check,
 Be required to pay by cash or money order for the next 12 months, and
 ACH Collections shall be discontinued for the next 12 months.

(Should your account become delinquent, your service is subject to disconnect. Additional fees are required to reconnect service.)

This service is offered as a convenience to City Utility Customers; therefore, I agree to hold the City of Mulvane harmless for action regarding this automatic draft.

Signature _____ Date _____
 (Must be submitted with voided check showing Name, Address, & Routing # of Bank.)

Cancellation of Authorization to Draft Account:

Signature _____ Date _____