



## AUTOMATIC BANK DRAFT AUTHORIZATION FORM

DATE: \_\_\_\_\_

Customer Acct Number (office use) \_\_\_\_\_

Customer Name: \_\_\_\_\_

Customer Bank Name: \_\_\_\_\_

Bank Address: \_\_\_\_\_

Bank City and State: \_\_\_\_\_

Bank Routing Number: \_\_\_\_\_

Checking Account Number: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Customer Phone #: \_\_\_\_\_

Customer Email: \_\_\_\_\_

Payments will be drafted on the 10<sup>th</sup> of the Month. If the 10<sup>th</sup> falls on a weekend, it will be drafted on the Monday after.

I authorize the City of Garfield to automatically draft my checking account for the amount due each month on my water bill.

Customer's Signature: \_\_\_\_\_

**(A service charge will be made on accounts drafted with insufficient funds)**