

City of Baxley
Bank Draft Request
Debit/Credit Authorization

BILLING INFORMATION	
Account Number	
Account Name	
Location	
Phone Number	
BANKING INFORMATION	
Name(s) on Bank Account	
Bank Name	
Bank Address	
Bank City, State, Zip	
Type of Account	
Bank Routing Number	
Bank Account Number	

By signing below, I/we hereby authorize the City of Baxley to initiate debit or credit entries to the account listed above and for the bank listed above to debit or credit the same to such account for monthly water, sewer, and garbage fees or adjustments accrued for the above location. I/we further authorize the City of Baxley to make necessary adjustments as required for incorrect or duplicate credit entries received in error. I/we acknowledge that the origination of ACH transactions to my/our account must comply with the provisions of U.S. law.

This authority is to remain in full force and effect until the City of Baxley has received written notification from me (or either of us) of its termination in such time and manner as to afford the City of Baxley and bank a reasonable opportunity to act on it.

I understand that I will receive a monthly bill that will have the word "draft" on it that will indicate the amount to be drafted from my account by the due date. A \$25 fee will be charged for insufficient funds or an account being closed without properly notifying the City of Baxley. I also understand that if corrections in the debit amount are necessary, it may involve an adjustment (credit or debit) to my billing account unless otherwise authorized.

Printed Name	Signature
ID Number	Date

VOIDED CHECK