

Phone Number: 731.989.3503 ~ ~ Fax Number: 731.983.5030

HOW BANK DRAFT WORKS

Fill out and sign the short form below which authorizes a draft in the amount of your water, sewer, sanitation, and gas bill to be drawn on your bank account each month. Then bring or mail this form to the Henderson Utility Department.

On the due date each month, a draft for the <u>net</u> amount of your bill will be sent to your bank just as if you had written a check. You will continue to receive a monthly bill so you will know in advance how much to expect withdrawn on your bank draft.

If you wish to discontinue payments by bank draft you may withdraw from the program at anytime.

I would like to apply for b	pank draft for the following utility account:
Name (as shown on your	Henderson Utility account):
Service Address:	
Current Phone Number: _	
	BANK DRAFT AUTHORIZATION
Department. Such draft or obbligation regarding specion the charging of same to this authorization shall re-	ak named below to pay my bills for utility service as rendered by the City of Henderson Utility or checks as may be presented for payment need not be signed by me. I relieve my bank from any ial advice or notice in writing or otherwise of the presentment or payment of any such draft or check or my account. The main valid until revoked in writing by me and I guarantee that until receipt of such revocation, my lly in honoring any such check or draft.
Your name as shown on E	Bank Records:
Name of Bank:	
Address of Bank:	(City and State)
Checking Account Number	er: Routing Number:
CHECK YOUR BILL T BEFORE YOU STOP P	BANK DRAFT PROCESSING WILL TAKE AT LEAST ONE BILLING CYCLE O ENSURE THAT YOUR BILL HAS BE SET UP TO PROCESS ON BANK DRAFT AYING YOUR BILL DIRECTLY
Date:	
	(Signature of Applicant)
	UTILITY DEPARTMENT USE
	Account Number: