

City of Bastrop

BANK DRAFT AUTHORIZATION (ACH DEBITS)


Account Holder

Name: _____

Service Address: _____ Bastrop, Texas 78602

Utility Account # _____ Phone # _____

Bank Account Information

Bank account indicated below at the depository financial institution named below, hereafter called DEPOSITORY, and to debit the same to such account. I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of U.S. law.  Initials _____

Bank Name (Print): _____

City: _____ State: _____ Zip: _____

Routing Number: _____

Account Number: _____

Must Attach a copy of Voided Check to this Form

Draft Authorization

I (we) hereby authorize **CITY OF BASTROP**, hereinafter called COMPANY, to initiate debit entries to my (our) bank account. Please initiate the following on my request for:

BEGIN DRAFT FROM: -Checking - Savings

CHANGE IN BANK ACCOUNTS, and to STOP Drafts from my PREVIOUS Bank Account listed on the below utility account. -Checking - Savings

Signature:  _____ Date: _____

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

NOTE: DEBIT AUTHORIZATIONS MUST PROVIDE THAT THE RECEIVER MAY REVOKE THE AUTHORIZATION ONLY BY NOTIFYING THE ORIGINATOR IN THE MANNER SPECIFIED IN THE AUTHORIZATION

STOP DRAFT

Effective Date: _____ Account Holder Name: _____

Bank Name: _____

SIGNATURE _____