



204 S. Main Street  
Randleman, NC 27317

## Authorization Agreement for Utility Bank Draft

Please complete this application and return it to the Utility Billing Department

New Authorization                      Utility Account Number: \_\_\_\_\_

Change to Authorization

Date: \_\_\_\_\_ Draft to    1<sup>st</sup> or 15<sup>th</sup> (*circle one*)    Checking or Savings (*circle one*)

Customer Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

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

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

I hereby authorize the City of Randleman to initiate debit entries, and if necessary, adjustment entries, from the account and financial institution indicated above. The draft will take place the month following the billing date on the day of the month selected. If the draft falls on a weekend or holiday, the draft will occur on the next business day. I agree to have sufficient funds available in my account, and understand that if the draft is dishonored or returned, it will be treated in the same manner as a returned check and will be subject to all applicable fees and charges. Furthermore, if I have two returned drafts in a twelve-month period, I will be removed from draft and shall be required to pay my bill cash only.

I understand that this authorization shall be in effect until I notify the City of Randleman at least two weeks prior to my draft date of my desire to terminate this service, or when I no longer have an active utility account with the City. I understand that my final bill will be subject to draft unless I notify the City of alternate arrangements. It is my responsibility to notify the Utility Billing Department of any changes in or with my financial institution that would directly affect this draft agreement.

Authorizing Signature: \_\_\_\_\_ Date \_\_\_\_\_

Attached Voided Check Here  
(Deposit Slips Cannot Be Processed)

**Thank You,**