

Name on utility bill (Please print) _____

Please take my payment directly from my: Checking _____ Savings _____

Name of Financial Institution _____

Bank or Financial Institution Number _____

Account Number _____

Authorized Signature on my Account _____

Date _____

*Please attach voided check or deposit slip.

*Customer will continue to receive monthly utility statement showing the amount of automatic payment to be deducted on the 10th of each month.

*Bill will indicate “Auto Pay” when service established