MERIDIAN
CITY OF MERIDIAN
A better longitude on life.

AUTHORIZATION FOR BANK DRAFT

RETURN TO: UTILITY BILLING, PO BOX 1430

MERIDIAN, MS 39302-1430

WATER ACCOUNT NUMBER: _____ DATE: _____

NAME: _____
(AS LISTED ON WATER ACCOUNT)

ADDRESS: _____
(AS LISTED ON WATER ACCOUNT)

TO: _____
(BANK NAME) (BANK ADDRESS)

EFFECTIVE THIS DATE, YOU ARE AUTHORIZED TO ACCEPT DRAFTS DRAWN ON MY BANK ACCOUNT # _____ BY THE CITY OF MERIDIAN UTILITY BILLING DIVISION FOR THE WATER SERVICE ACCOUNT ABOVE AND ANY FURTHER ACCOUNTS THAT I MAY ESTABLISH.

PLEASE CHECK ONE: ACCOUNT IS: CHECKING _____ SAVINGS _____

I CERTIFY THAT I WILL NOTIFY THE CITY OF MERIDIAN UTILITY BILLING DIVISION IN WRITING AT ANYTIME I WISH THIS DRAFT AUTHORIZATION DISCONTINUED.

_____ _____
(NAME AS LISTED ON BANK ACCOUNT) (AUTHORIZED SIGNATURE)

_____ _____
(MAILING ADDRESS) (PHONE NUMBER)

ATTACH A VOIDED CHECK OR COPY OF CHECK HERE