



CITY OF GILMER-BANK DRAFT AUTHORIZATION

ACCOUNT NUMBER: _____ NAME: _____

TELEPHONE NUMBER: _____

NAME AS IT APPEARS ON BANK ACCOUNT: _____

BANK NAME: _____

BANK ABA (ROUTING) NUMBER: _____

BANK ACCOUNT NUMBER: _____

I hereby authorize The City of Gilmer to draw a draft on my bank account as listed above for the total amount of the monthly utility bill, on the above listed account. I realize the amount drafted from my account will vary each month. **IF THE BANK ACCOUNT NAME IS DIFFERENT FROM THE WATER ACCOUNT NAME, BANK ACCOUNT HOLDER MUST SIGN AND A VALID ID MUST BE KEPT ON FILE WITH THE VOIDED CHECK.**

X _____ DATE: _____

Signature of Drawer

Please attach a blank voided check for confirmation of bank account and routing information.

OFFICE USE ONLY

Entry Date: _____ Completed By: _____