

Bank Draft Authorization

The Utility Billing Department of the City of Amarillo is hereby authorized to draft monthly beginning _____ .

Utility Customer Name

Name of Bank

Service Address

Bank Street/PO Address

Utility Account #

City State & Zip Code

Customer Daytime Phone

Bank Routing Number

Customer Signature

Date

Checking Account Number

PLEASE ATTACH A VOIDED CHECK/DEPOSIT SLIP TO THIS AUTHORIZATION FORM.

IF YOU WANT TO RECEIVE A BILL, PLEASE CHECK HERE _____ .