

## **AUTOMATIC BANK DRAFTING IS HERE!**

How the service works

You will receive your monthly utility bill in the mail on your normal billing date. The bill will state "Amount Due will be Bank Drafted – DO NOT PAY." Your bank will then deduct the billed amount one to two days before the due date and forward your payment to the Town. Please allow four to six weeks for drafting to be activated.

## What are the advantages?

No monthly check to write Saves on Postage Never a late charge Fast and Easy

# Is there a fee for this service?

There is no charge for bank drafting, and it may be discontinued at any time simply by notifying the Town of Fairview in writing.

#### How to enroll:

Complete the "Bank Draft Authorization" form below. To find the Routing Number, contact your bank or other financial institution. This number should have nine digits. Please attach a voided check from the account to be drafted. Mail the completed authorization form and voided check to the Town of Fairview, Utility Billing Office, 372 Town Place, Fairview, TX 75069. For additional information, call the Utility Billing Office at 972-562-0522, ext. 4242.

# BANK DRAFT AUTHORIZATION \*Please note that after returning this form to us, your next bill will prenote to confirm your banking information is correct, and will not be drafted from your account. You will need to send in a check for your next payment. Name of Bank or other financial institution Bank address City State Zip Code Please check one: [ ] Checking Account [ ] Savings Account Routing Number Account Number I (we) have given this authority to the Town of Fairview to bank draft my (our) account for the payment of my (our) monthly utility bill. I (we) understand this authority shall remain in full force and effect until written notification of termination is received from me (us), and the Town of Fairview and the banking institution have a reasonable opportunity to act upon it. I (we) understand that nothing contained in this Authorization shall serve to reduce my (our) obligation to pay my (our) utility bill, and services may be disconnected should I (we) fail to have sufficient funds in the above referenced account to cover the amount of the bill. Account Authorization Signature(s) (Each person who signs on the account must sign the authorization form.) Signature Signature Date Date Name as it appears on the Town of Fairview account (Please Print) Utility account number Service Address Home Phone # Work Phone #

Return this authorization and voided check to:

Town of Fairview Utility Billing Office 372 Town Place Fairview, TX 75069