



1002 Central Parkway SW, Decatur, AL 35601

Phone: 256-552-1400 Fax: 256-552-1416

E-mail Address: CSR@decaturutilities.com

Customer #: _____

BANK DRAFT AUTHORIZATION

(Name of Bank)

(Depositor's Name as Shown on Bank Records, Please Print)

(Bank Routing Number)

(Checking or Savings Account Number)

I HEREBY AUTHORIZE MY UTILITY BILLS TO BE PAID BY MY BANK:

(Date)

(Bank Signature of Depositor)

Home Phone # _____

Cell Phone # _____

*******Return this form along with a voided check*******

LIST BELOW ALL ACCOUNTS TO BE PAID BY THIS BANK DRAFT

Office Use Only	
Entered	_____
Scanned	_____
NS Order	_____
CSR Initials	_____

Account #

Address

Attach Voided Check Here