City of Winston-Salem

AUTHORIZATION FOR AUTOMATIC BANK DRAFT

Account Action	
New Draft	
Change Bank	
Cancel	
Change Bank Account #	

To: City of Winston-Salem
Revenue Division
P. O. Box 2756
Winston-Salem, North Carolina 27102-2756

Account Name: _____

Service Address: _____

Utility/Stormwater
Account Number: _____

Name of Bank: _____

Routing/Transit Number: _____ Checking Account Number: _____

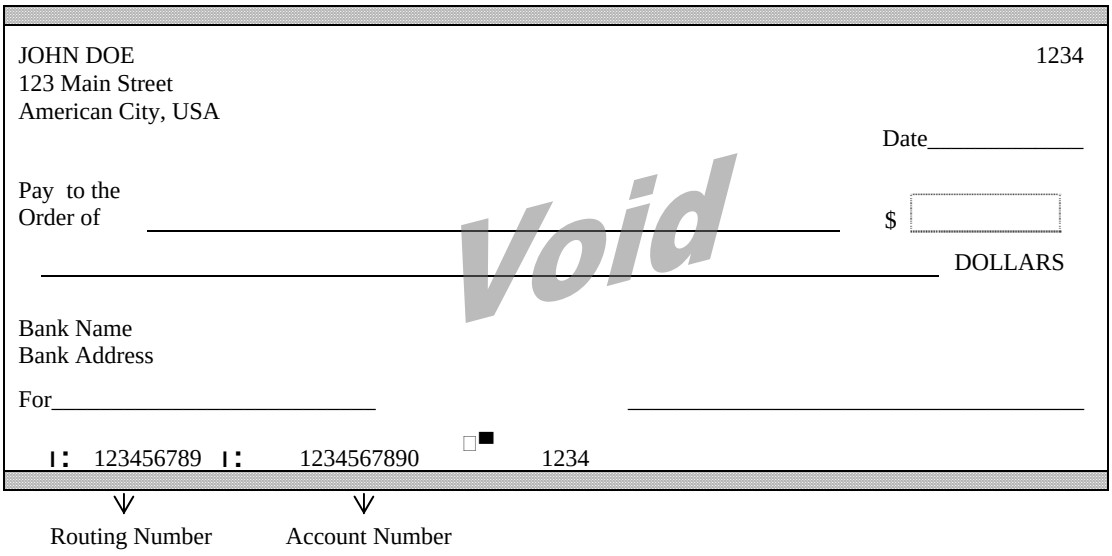
I authorize the City of Winston-Salem Revenue Division to automatically draft the above bank account for payment of my utility/stormwater invoice. It is my understanding that my bank account will be drafted approximately 10 days from the bill date. Should I wish to terminate this automatic draft, I will notify the City of Winston-Salem Revenue Division in writing of this intent at the above address.

It is also my understanding, that if for any reason the bank draft is dishonored by my bank, the City of Winston-Salem will add a $25 fee to my account and it shall be paid in accordance with the payment terms of my account.

_____ _____
Bank Account Owner Signature | Joint Bank Account Owner Signature

_____ _____
Bank Account Owner Printed Name | Joint Bank Account Owner Printed Name

_____ _____
Date | Date



Please Return This Form With a Voided Check

05/09/03