



CITY OF FOLKSTON

Application for Water, Sewer & Garbage Bank Draft Authorization Form

Instructions:

- 1) Complete the information below.
- 2) Mark the box before type of bank account to indicate whether your payment will be deducted from your checking or savings account.
- 3) Attach a voided check for verification of all financial institution information.
- 4) Return to Folkston City Hall

Date _____ Account Number _____ / _____ / _____

Name on Utility Bill _____

Service Address _____

Phone Number _____

Bank Name _____

Bank Address _____

Bank Account Number _____

Name on Account _____

Bank Routing Number _____ (nine digits)

Type of Bank Account: _____ CHECKING _____ SAVINGS

I authorize the City of Folkston to initiate electronic debit entries to the bank account described above for payment of my utility bill. I acknowledge that the origination of ACH transactions to my account must comply with the provisions of U.S. law. This authority will remain in effect until I have cancelled it in writing. Any change to the above authorization must be made at least two weeks before the scheduled due date.

Signature of Customer

Date

Signature of Utility Dept. Representative

Date Entered