UTILITY BILL AUTO BANK DRAFT



No monthly check to write. No postage. No late fees. No cost to join.

To enroll, send a voided check or a bank authorization for the account to be drafted. Mail this completed form along with a voided check or bank authorization to the address at the bottom of this form. For additional information, call the Utility Billing office at 972-886-4242 or email UtilityBilling@FairviewTexas.org.

You will receive your monthly utility bill on your normal billing date. The bill will state "Bank Draft- <u>DO NOT</u> <u>PAY</u>." Your bank will then deduct the payment on the due date and will forward it to the Town.

BANK DRAFT AUTHORIZATION

Name of bank or o	ther :			
financial instituti	ion			
Bank address :				
	Street			
	City		State	ZIP code
Checking Savings		Routing Number: (Nine digits)		
		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. 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 Date Signature Date		Date	Primary phone number	
		Date	Secondary phone numb	Secondary phone number
Printed name, as it appears on the Town of Fairview account			Utility account number	 Updated 5-5-2023
	Return this form with a v		or a bank authorization to: of Fairview	
	37	Fairview, Texas 75069		