

AUTHORIZATION AGREEMENT FOR AUTOMATIC BANK DRAFTING

I hereby authorize the City of Daytona Beach Shores to initiate debit entries and if necessary, credit entries and adjustments to my checking or savings account at the financial institution indicated below.

CUSTOMER NAME	CUSTOMER UTILITY ACCOUNT NUMBER (ON YOUR BILL)
CUSTOMER TELEPHONE (IN CASE WE HAVE A QUESTION)	NAME OF FINANCIAL INSTITUTION
STREET ADDRESS AND TELEPHONE NUMBER OF YOUR BANK BRANCH	
BANK ACCOUNT NUMBER (YOUR ACCOUNT NUMBER)	BANK TRANSIT NUMBER
TYPE OF ACCOUNT (CHECK ONE) <input type="radio"/> CHECKING <input type="radio"/> SAVINGS (IF CHECKING, ATTACH A VOIDED CHECK)	IMPORTANT NOTICES: BANK DRAFTING REQUIRES THAT FUNDS ARE AVAILABLE IN YOUR ACCOUNT ON THE DATE OF THE BANK DRAFT, JUST AS IF YOU HAD WRITTEN A CHECK. PENALTY CHARGES MAY APPLY FOR DRAFTS THAT ARE REFUSED BY THE BANK FOR NON-SUFFICIENT FUNDS OR CLOSED ACCOUNTS. TO CANCEL BANK DRAFTING, SIMPLY CALL THE FINANCE/UTILITY DEPARTMENT. BANK DRAFTING WILL BE DISCONTINUED AT THE BILLING CYCLE <i>FOLLOWING OUR REQUEST.</i>
BANK ACCOUNT HOLDER'S SIGNATURE IS REQUIRED FOR PROCESSING CUSTOMER'S SIGNATURE _____ DATE _____	

MAIL TO:

**City of Daytona Beach Shores
Finance/Utility Department
3050 S. Atlantic Avenue
Daytona Beach Shores, FL 32118**