

VILLAGE OF COVINGTON AUTOMATIC WITHDRAW AUTHORIZATION

This document must be completed and signed by a Covington utility customer requesting automatic withdraw of funds to pay Covington monthly utility bills. Customers must attach a voided check for the account they wish to have funds withdrawn from to help verify the accuracy of account numbers and bank routing numbers.

Bank Name: _____ Bank Phone #: _____

Bank routing #: _____ Bank Account #: _____

Customer Email: _____ Customer Phone #: _____

Account Number of Utility Account(s) to include: _____

Attach a voided check for the account to be debited here.

By signing this document I understand I am giving authorization for the Village of Covington to debit the from the above listed account, funds to pay monthly Covington utility bills. I further understand that this will be completed electronically or by any other commercially accepted method and my monthly invoice will be provided to me VIA Email. I understand this also authorizes the financial institution holding the Account to post all such entries.

This authorization will remain in effect until the Village of Covington receives a written termination notice

print name	authorized signature	date

VILLAGE USE ONLY

Date Entered into system _____ Completed by _____