



WATER DEPARTMENT BANK DRAFTS

NAME: _____

ADDRESS: _____

PHONE: _____ **EMAIL:** _____

WATER ACCOUNT #: _____

NAME OF BANK: _____

BANK ACCOUNT #: _____

BANK ROUTE: _____

I AUTHORIZE THE CITY OF BRANDON TO DRAW BANK DRAFTS ON MY ACCOUNT FOR PAYMENT OF MY WATER BILL EACH MONTH. BANK DRAFT PAYMENTS ARE SENT TO THE BANK FOR COLLECTION AND POSTED TO THE WATER ACCOUNTS ON THE 20TH OF EACH MONTH. IF THE 20TH FALLS ON A HOLIDAY OR A WEEKEND, THEN YOUR ACCOUNT WILL BE DRAFTED ON THE NEXT WORKING DAY AFTER THE 20TH.

(SIGNATURE)

(DATE)

******PLEASE ATTACH VOIDED CHECK******