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| **RiverSouth Rural Water District** |
| **Automatic Bank Draft Authorization Agreement Form** |
|  |
| **Customer Information** |
|   |
|   |
| Customer Name Phone # |
|   |
|   |
| Mailing Address City, State, Zip |
|   |
|  |
| **Financial Information** |
|   |
|   |
| Name of Financial Institution Routing Number |
|   |
|   |
| Financial Institution Address Account Number |
|   |
|  |
| **ustomer Authorization Signature** |
| *I grant authority to RiverSouth Rural Water District to draft my account listed above for payment* |
| *amounts due on the account(s) listed below. The financial institution listed above is authorized* |
| *to pay such drafts when so drawn and presented for payment until authority is revoked.* |
|  |
| Authorized Signature: |
|   |
|   |
|  |
| RSRW account numbers that will be drafted: \_\_\_\_\_\_\_\_\_\_ :\_\_\_\_\_\_\_\_\_\_: \_\_\_\_\_\_\_\_\_\_: \_\_\_\_\_\_\_\_\_\_ |
| \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ Accounts entered |
|   |
| ***Please attach a voided check or deposit slip and return this form to RiverSouth Rural Water.*** |
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| DRAFTS WILL NOT BE MADE ON PAST DUE ACCOUNTS |
| $25 CHARGE FOR DRAFTS MADE ON ACCOUNTS WITH INSUFFICIENT FUNDS |
| ***Drafts will occur on the 10th of each month.*** |
|  |
| **Forward Completed Authorization Form** |
| Fax to: 479.667.2299 Mail to: P O Box 1375 Ozark, AR 72949 |
| Return to our Office: 2719 S Highway 23 Ozark |
| Office Hours Monday through Thursday 7:00 AM ~ 4:30 Phone:479.667.3466 Toll Free:877.501.3466 |