



CITY OF COLLINS MISSISSIPPI

BANK DRAFT INFORMATION FORM

PLEASE CHOOSE ONE OF THE FOLLOWING:

_____ START NEW BANK DRAFT SERVICE

_____ STOP CURRENT BANK DRAFT SERVICE

_____ CHANGE BANK DRAFT INFORMATION FROM OLD BANK ACCOUNT TO NEW BANK ACCOUNT

NAME: _____ SERVICE ADDRESS: _____

PHONE: _____ EMAIL: _____

CITY OF COLLINS UTILITY ACCOUNT NUMBER: _____

START NEW BANK DRAFT INFORMATION

NAME OF BANK: _____

BANK ACCOUNT #: _____ BANK ROUTING #: _____

REQUESTED DATE TO BE EFFECTIVE: _____ Please provide a voided check or copy of check

STOP CURRENT BANK DRAFT INFORMATION

NAME OF BANK: _____

REQUESTED DATE TO BE EFFECTIVE: _____

New Bank Draft – I authorize the City of Collins to draw bank drafts on my account each month for payment of my utility bill. Bank draft payments are drafted on the 8th of each month, unless noted otherwise on the bill; if the 8th falls on a holiday or a weekend, then bank drafts will be processed the next business day. New Bank Draft forms must be received by the 5th of the month in which draft is requested to begin in order for this action to take place. Stop Bank Draft – I understand that a request to stop bank draft on my account must be received by the City of Collins prior to the 20th of the month for this action to take place.

ACCOUNT HOLDER SIGNATURE

DATE

OFFICE USE ONLY

DATE RECEIVED: _____ DATE ENTERED IN SYSTEM: _____ CLERK: _____