

ACH BANK DRAFT WATER FORM

CUSTOMER INFORMATION				
N ame:				
Water Account #:				
Phone:				
-MAIL:				
CUSTOMER INFORMATION				
Bank Name:				
CCOUNT #:OUTING/TRANSIT #:				
Name on Account:				
Account Type (circle one):	CHECKING	Savings		
I certify that the information abor ACH transactions, and that I am a		•	signated of the account pro	vider for
I authorize City of Bells to deduct written notification to City of Bell			Auto Draft. I understand ser	nding a
Print Authorized Name				
Authorized Signature		Date		
	COPY OF A P I	CTURE ID IS R EQUIRED		

203 South Broadway, Bells, Texas 75414