



# City of Rio Vista

## AUTOMATIC BANK DRAFT AUTHORIZATION FORM

Please complete the following information and mail, fax or email this form to the City of Rio Vista at the address or fax number listed below. Please provide a voided check with this completed form.

\_\_\_\_\_  
Printed Customer Name(s) shown on City of Rio Vista Account Statement

\_\_\_\_\_  
City of Rio Vista Utility Account Number

\_\_\_\_\_  
Service Address

\_\_\_\_\_  
City    State    Zip Code

\_\_\_\_\_  
Bank Name    Name(s) listed on the Bank Account

\_\_\_\_\_  
Bank Account Number / Routing Number

\_\_\_\_\_  
Daytime Phone Number

\_\_\_\_\_  
Evening Phone Number

Check one: (    ) Checking Account (    ) Savings Account

I authorize the City of Rio Vista Utilities to debit (draft) the account identified above each month for the amount of services billed on my water utility account. Additionally, I authorize my financial institution identified above to debit the same amounts from my account. I understand that this authorization will be in effect until I notify the City of Rio Vista Utilities and my bank, in writing, that I no longer desire this service. I also understand that if corrections in the debit amount are necessary, it may involve an adjustment (credit or debit) to my utility account.

\_\_\_\_\_  
Customer Signature

\_\_\_\_\_  
Date