

CITY OF PLAINVIEW

BANK ACCT# _____ NAME _____

ROUTING # _____ ADDRESS _____

WATER ACCT # _____

AUTHORITY TO BANK

To the _____ BANK of _____

You are hereby authorized to charge to my account and pay draft drawn by CITY OF PLAINVIEW each month in payment of my account to said City of Plainview for the preceding month for Water, Sewer, and Sanitation service, provided that the amount of said draft is in each instance deposited by you to the account of the City of Plainview.

This authorization shall continue until countermanded by me in writing.

This the _____ day of _____, _____

Signature of Depositor

Please attach copy of voided check.