

## PO Box 350, Trenton, TN 38382 Fax# 731-855-1454

## BANK DRAFT AUTHORIZATION

## PLEASE INCLUDE A VOIDED CHECK

I (we) hereby authorize Gibson County Utility District, hereinafter called Company, to initiate debit entries to my (our) account indicated below and the financial institution named below, hereinafter called Financial Institution, to debit the same to such account for (Application). I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of U.S. Law.

Financial Institution					
Address					
City/State/Zip					
Routing #		Account#			
Check One:	Checking	Savings			
Check One:	Residential	Commerci	al		
Check One:	Add	Remove	Change		
Start Date:	Frequency:	Monthly on due o	date	Amount: As billed	
For recurring debit on the business day and will not h				our account on the next	
and the date on or after the the Rules state that the Or advance of the debit.  This authority is to remain	e transfer will be debite riginator must sent the in the inferior of the first transfer in full force and effective in full force and effective in the first transfer will be used to be us	ed at least ten calen Receiver notification ve until COMPANY h	dar days in advance of new date at least as received written r	itten notification of the amount of the debit. If the date varies, t seven calendar days in notification from me/us of it N a reasonable opportunity to	
Print Name:		GCUD Account#			
Signature:				Date:	
This authorization is to District office.	remain in effect until	verbal or writter	notification is ma	de to Gibson County Utility	
FOR OFFICE USE ONLY:	 Circle if	flex customer:	F		
UMS Date:		Special Note:			
Initial:		_			