



City of Shenandoah
ELECTRONIC BANK DRAFT PAYMENT FORM
29955 I-45 North Shenandoah, Texas 77381
(281) 298-5522 Fax (281) 367-2225

Please read this form very carefully before signing.

Authorization agreement for **adding, removing** or **changing banks** from which my utility account will be electronically drafted.

I authorize the City of Shenandoah to initiate variable monthly debit entries to my checking/savings account to pay my monthly bill on the:

- 1st of each month 10th of each month 13th of each month 15th of each month

Add the following utility accounts to electronic bank draft status: _____/_____

Remove my utility account from electronic bank draft status: _____/_____

Change banks and/or bank accounts for my electronic bank drafts: _____/_____

- *Remember, if you have more than one utility account you must list all utility accounts that you wish to add, remove or change information on regarding electronic payments.*

Financial Institution Name

Customer Name / Phone Number (**PRINT**)

Financial Routing Number

Customer Utility Service Address

.....
I agree to the following provisions of Electronic Payment Processing:

1. I understand that **no changes** will be made to my utility account regarding electronic bank drafts unless a copy of this form is **completely filled out for every status change**.
2. **Changes regarding financial institutions or bank accounts will not be made to my account unless I fill out another copy of this form.** If I close out my bank account **BEFORE** notifying the City of Shenandoah and I have an electronic payment already scheduled to be drafted from my utility account **I am responsible for any collection charges.**
3. **I am responsible for any collection charges** due if an electronic payment is returned as uncollected for any reason (for example: non-sufficient funds, closed bank account, incorrect account number). The City of Shenandoah will process all returned items in accordance with its policies for all past due utility bills. The City of Shenandoah reserves the right to represent any returned electronic payment.
4. I will provide the City of Shenandoah with a **voided check or deposit slip with correct imprinted routing and bank account numbers** along with this form before I can be added to electronic bank draft status.

Customer Signature / Date

Customer Service Clerk / Date