

CITY OF OLIVE BRANCH
BANK DRAFT NOTICE FORM

Date: _____

Bank Name: _____

Bank Account #: _____

Customer Name: _____

Service Address: _____

Phone #: _____

Utility Account #: _____

This is to authorize the City of Olive Branch Utility Department to debit my bank account in order to pay for my utility billing. I understand that auto payment will be deducted on or before the due date of each billing. The draft set up can take up to 45 days to complete, therefore continue to pay until the bill indicates that it is paid by bank draft. Bank drafts may be canceled with the Bank Draft Cancellation Form and may take up to 45 days to complete.

Signature: _____