



ADMINISTRATION: 21 Country Road • Village of Golf, FL 33436-5299 • (561) 732-0236 • FAX (561) 732-7024
UTILITY DEPARTMENT: (561) 737-7995 • www.villageofgolf.org

AUTOMATIC WITHDRAWAL AUTHORIZATION

CUSTOMER INFORMATION

Name (As Shown on your Utility Bill):

Service Address:

City:

State:

ZIP Code:

Home Phone:

Cell Phone:

Work Phone:

Account Number (As Shown on your Utility Bill):

Email Address:

FINANCIAL INSTITUTION INFORMATION

Bank Name:

Branch:

Bank Address:

City:

State:

ZIP Code:

Please Choose One of the Following:

Savings Account #:

Routing/Transit #:

*Checking Account #:

Routing/Transit #:

(*ATTACH VOIDED BLANK CHECK)

AUTHORIZATION

I authorize the financial institution named above to pay my monthly utility bill to the Village of Golf by charging each payment to the account specified by me. I agree that each payment shall be the same as if it were an instrument signed by me. This authority is to remain in effect until revoked by me in writing. In addition, I have the right to stop payment of a charge by notifying the Village of Golf 7 days prior to the due date on my bill. I will still be responsible for payment of my bill by the due date.

I understand, however, that both the financial institution and the Village of Golf reserve the right to terminate this payment plan or my participation therein.

A return check fee will be charged for all non-sufficient funds.

Signature:

Date:

Completed form may be faxed to: 561-732-7024
or mailed to:
The Village of Golf, 21 Country Road, Village of Golf, FL 33436