**RECEIVED BY: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**TRANSMITTED BY: \_\_\_\_\_\_\_\_\_\_\_**

**DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**AUTHORIZATION FOR AUTOMATIC BILL PAYMENT**

**RETURN THIS FORM TO:**

**VAN BUREN MUNICIPAL UTILITIES**

**OAK GROVE PUBLIC WATER AUTHORITY**

**P O DRAWER 1269**

**VAN BUREN, AR 72957**

**NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **(AS SHOWN ON WATER ACCOUNT)**

**SERVICE ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**CITY: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_STATE:\_\_\_\_\_\_\_\_\_\_ZIP CODE: \_\_\_\_\_\_\_\_\_\_\_**

**UTILITY ACCOUNT NUMBER: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**CIRCLE ONE:**

 **CHECKING ACCOUNT SAVINGS ACCOUNT**

**IMPORTANT:**

**PLEASE RETURN A VOIDED CHECK WITH FORM TO ENSURE PROPER PROCESSING**

**(ATTACH CHECK HERE)**

**I authorize a representative from VBMU/OGPWA to draft my checking/savings account monthly. In the amount of my monthly utility bill and to make that deduction payable to the VBMU/OGPWA. In making this authorization, I agree to all Terms and Conditions of Authorization**

**SIGNATURE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_DATE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**