



EST. 1955

SPRING VALLEY VILLAGE

Service Account Number: _____

Service Address: _____

Phone Number: _____

A voided check MUST be attached with this request for processing.

I, _____, do hereby authorize the City of Spring Valley Village to make a monthly draft from my checking account for the purpose of paying my utility bill.

I understand and acknowledge the following:

_____ The amount drafted will not be the same every month

_____ The amount will draft on ***the last working day of the month***

_____ Should my draft be returned by my bank, I am subject to a 'return check' fee in the amount of \$35.00 and my account will be taken off the Auto Draft

_____ You will still receive your monthly Utility Bill, but the words "PD BY DRAFT" will appear on the 'amount after due date' box

_____ You ***will not*** receive a notification, from us, when the amount is drafted

_____ Should my bank information change, I am responsible for updating it with The City, otherwise I am subject to the \$35, 'return check' fee, should my draft be returned

Name of Financial Institution & Routing Number

Signature

Checking Account Number

Date

1025 CAMPBELL RD. HOUSTON, TX 77055
utilities@springvalleytx.com
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www.springvalleytx.com