



City of Scott City
215 Chester Ave.
Scott City, Mo 63780
Phone: 573-264-2157 Fax: 573-264-4281

ACH Automatic Bank Draft Payment Sign-up Form

Customer Information:

Name: _____

Account Number: _____

E-Mail Address: _____

Phone Number: _____

Financial Institution Information

Bank Name and Location: _____

Name on the Account: _____

Bank Routing Number: _____

Account Number: _____

Account Type (Circle One): Checking Savings

Voided Check: Customer must have avoided check to be placed on ACH.

I certify that the information above is correct, that I am an authorized signer or designate of the account provided for ACH transactions, and that I am authorized to provide this information.

I authorize City Hall – Water Dept. to deduct my utility payment from this bank account via Electronic Fund Transfer. I understand that payment will be drafted on the 10th of every month. If the payment falls on a holiday or weekend, the draft will be processed on the next business day. I understand sending a written notification of removal to City Hall will revoke this authorization.

City Hall reserves the right to cancel Electronic Fund Transfer due to insufficient funds without notice.

Authorized Name Printed

Authorized Signature

Date