

## **TOWN OF GREYBULL**

## **Automatic Payment Authorization**

(307)765-9431 – Fax (307)765-2409 24 S 5<sup>th</sup> St, PO Box 271, Greybull, WY 82426

I hereby authorize the Town of Greybull to automatically withdraw from my checking or savings account (as specified below) and pay the amount of my monthly utility service bill(s) on the 10<sup>th</sup> of each month.

If the due date falls on a Saturday the withdrawal will occur that Friday, if the due date falls on a Sunday the withdrawal will occur that Monday.

This authorization shall continue until I notify the Town of Greybull in writing of the cancellation. Notice must be received by the Town of Greybull Utility Department at least three business days in advance of the payment date. Shorter notice may be accepted but is not guaranteed.

## **Town of Greybull Utility Information**

Utility Account Number:			
Bank Account Infor			
Bank Name:			
Account Type:   Checking	ng 🗆 Savings		
Bank Account Number:			
Bank Routing Number:			
	nse sign Name(s) <u>EX</u> A	ACTLY as you do on your checks.	
Applicant Signature	Date	Applicant Signature	Date

IMPORTANT: Please enclose a blank, voided check or deposit slip so we can verify the necessary routing and account numbers.