



CITY OF KYLE-UTILITY BILLING DEPT.
100 W. CENTER STREET
KYLE, TX 78640
PHONE: (512) 262-3960 FAX: (512) 262-3965
UTILITIES@CITYOFKYLE.COM

FOR OFFICE USE ONLY:

Date Received: _____

UB Clerk Inits: _____

Date Entered: _____

Authorization Agreement for Direct Payments (Debits).

LAST NAME

FIRST NAME

UTILITY ACCOUNT #

SERVICE ADDRESS

PHONE NUMBER

EMAIL ADDRESS

Account Type:	Checking	Routing #	_____
	Savings	Account #	_____
Name of Bank (Branch)		City / State / Zip Code	Drivers License # / State
<u>Recurring Monthly</u> *Account will first pre-note on the 15th of the month. After this pre-note is successful the amount of the next bill will be auto debited from the customer's account. The current month's bill must be paid with either cash, check, credit card, or money order until pre-note is completed			

TO PROCESS AGREEMENT PLEASE SUBMIT A VOIDED CHECK: To ensure the highest level of security regarding your bank information, our preferred method of receiving a voided check is to deliver it in person to our office or place it in our night dropbox. We will still accept a scanned emailed copy or a faxed copy and/or mailed version of your voided check; however, you are responsible for contacting our Utility Billing Department to ensure receipt of your information.

IMPORTANT NOTICE - PLEASE READ

Your **FIRST** bill after signing up for automatic bank account should draft as long as the information you supplied is correct. You will still continue to receive a water bill.

YOUR RESPONSIBILITY:

1. To notify us of any changes to your bank account, phone number and email address.
2. To notify us if you transfer water service to another address within the city.

OUR RESPONSIBILITY:

1. To set up your account in our billing system.
2. To notify you of any changes or problems with the drafted account.

By signing, I authorize **City of Kyle** to initiate a **DEBIT** entry to my account listed below. This authority will remain in effect until I notify the City, by completing an Auto-Debit Cancellation Form in writing. (Please allow up to one week for us to receive and process the cancellation form). If the debit is returned unpaid the City may debit returned item fees, as posted, from my account in the same manner.

I have read and understand each party's (mine and the City's) responsibility.

Signature

Date