

## CHARLOTTE COUNTY UTILITIES

(941) 764-4300 • (800) 524-3494 • TDD (941) 764-4535

P. O. Box 516000 Punta Gorda FL, 33951-6000

## AUTOMATIC BANK DRAFT AUTHORIZATION

Charlotte County utilities can automatically draft your monthly utility payment at no charge. Charlotte County Utilities does not charge for this service, but before enrolling, please check with your bank to see if they charge for automatic debit service from your bank account. Automatic bank draft can be done using a checking or savings account from any United States Bank.

Please continue to pay your monthly bill as usual until you see the message "DO NOT PAY – account is being drafted for the amount owed". It may take two (2) billing cycles before your first draft is made.

The amount shown on your monthly bill will be debited on the bill DUE DATE printed on each monthly bill. Please be advised if the automatic payment is not honored by your bank, your bank will return the automatic payment just as if you had a returned check. Also, if you close or change your bank account without notifying Charlotte County Utilities, you may be subject to charges from both Charlotte County Utilities and your bank. It is your responsibility to notify and update Charlotte County Utilities when your bank closes or merges with another bank that results in a change to your bank account information.

You may cancel your participation in this program in writing at any time.

## DO NOT EMAIL FORM, EMAILS ARE CONSIDERED PUBLIC RECORD – FOR YOUR SECURITY, PLEASE MAIL YOUR VOIDED CHECK AND COMPLETED FORM TO THE MAILING ADDRESS LISTED AT TOP OF FORM

,				it entry charges to my bank ac ills rendered by Charlotte Cou		
I	☐ I have the right to sto to my bank account I		ent of debit entry charges by notifying Charlotte County Utilities, in writing, prior bited.			
ļ	writing from me to m County Utilities and a	I understand that this authority will remain in effect until Charlotte County Utilities receives notification in writing from me to make any changes or choose to withdraw from the program and I must notify Charlotte County Utilities and allow a reasonable amount of time for Charlotte County Utilities and the bank to cancel the automatic bank draft authorization.				
I	☐ I understand that Ch may cancel my partic			fee in the event my bank does	not pay a debit and	
PLEASE CHECK	CONE: ☐ New Applicat	tion 🔲 Change Ba	nk or Bank Accou	unt Information		
Effective Enrollm	nent/Change Date:			Account Type:   Checking	☐ Savings	
CCU Account No	D:		Contact	Phone:		
Customer Name	:					
	:					
Billing Address:						
Name on Bank A	Account:			· · · · · · · · · · · · · · · · · · ·		
	Bank Phone No:					
City:		State:	Zip:	Country:		
Bank Transit/AB	A No:	Ba	ink Account No: _			
numbers. Please		e check and in the sp	pace for your sigi	showing the correct routing an nature. (A deposit slip or startion.		
By signing below the authority to d	. •	the service stated al	bove. I confirm th	at I am the person signing belo	ow and that I have	
Customer Signa	ature:			Date:		