



City of Brookings

I authorize the City of Brookings to deduct my utility payment from the bank account referenced below. I understand the deduction will be made each month on the date specified below (or the following business day). The amount to be deducted from my account will be reflected in the total due portion of my utility bill. The utility bill will be mailed by the 5th working day of the same month as the deduction.

PLEASE PRINT

Name as it appears on Bank Account: _____

Bank Name: _____

Bank Routing #: _____

Bank Account #: _____

What date do you want your payment deducted? (check one only) ___10th ___15th ___20th

Signature

Date

Service Address: _____

Utility Account #: _____

I would like to receive a statement each month: Yes _____ No _____

******A VOIDED CHECK MUST BE INCLUDED WITH THIS FORM******

ATTACH VOIDED CHECK HERE	<ol style="list-style-type: none"> 1. A voided check must be attached in order to set up direct pay 2. Please take time to double check all information before signing and returning this form
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