

**AUTHORIZATION TO INITIATE UTILITY BILLING AUTOMATIC DRAFT
TOWN OF BOONE, N.C.**

DATE _____ ACCOUNT # _____

NAME _____

METER LOCATION _____

MAILING ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE _____

I, _____ (please print), a customer of the Town of Boone Water & Sewer Department, P.O. Drawer 192, Boone, N.C. 28607, do hereby authorize the Utility Billing Department through its authorized employees, to draw monthly drafts on my account from the specified financial institution as payment for water and sewer services furnished to me by the Town of Boone. It is understood that the specified account will be drafted on or about the 20th of each month.

CUSTOMER SIGNATURE _____ DATE _____

NAME OF FINANCIAL INSTITUTION _____

BANK ROUTING # _____ ACCOUNT # _____

***** VOIDED CHECK MUST BE ATTACHED TO INITIATE DRAFT PROCESS *****

**567 WEST KING STREET – PO DRAWER 192, BOONE, NC 28607
PHONE: (828)268-6220 FAX: (828)268-6224**