

City of Bucklin

117 W. Oak PO Box 458, Bucklin, KS 67834

Ph. 620-826-3581 Fax 620-826-3894

Email: rhager@bucklinks.com

Dear Customer,

Attached is the Bank Draft Authorization (ACH) form. Sign and return the completed form and a voided check to City Hall.

By completing the authorization form below, you agree to have your bank account automatically drafted for the full amount of your utility bill.

ACH may take up to 30 days to process. This indicates that the bill and all subsequent bills will be drafted from your checking account on the 10th of the month prior to the due date of the bill until you notify us to cancel. Please notify us within 30 days of the next payment for cancelation.

Thank you,

City of Bucklin

CREDIT CARD/BANK DRAFT AUTHORIZATION FORM

Name (as it appears on your Utility Account):		
Service Address:		Service ID #:
Phone #:	Bank Name:	
Bank ABA/Routing #:		Bank Account #:
Credit Card #:	Exp Date:	CVV:
Email Receipt: Y N	Email Address:	
Account Holder's Signature:		Date:

PLEASE READ CAREFULLY!

You are hereby authorized and requested, until otherwise instructed, to pay and charge to my/our account all bills for water, sewer, trash and drainage service at the address and/or account number shown above, rendered against the undersigned by the City of Bucklin.