



# ENROLLMENT FOR BANK DRAFT

Complete form and mail or fax to the address below along with a VOIDED CHECK on the bank or financial institution account from which your Huntsville Utilities bill should be deducted. All drafts are processed electronically. Please be sure the account you wish to draft meets this requirement. (Equity asset accounts, money market accounts and open end credit accounts do not qualify for electronic drafting.) Submission of a Bank Draft Enrollment Form does not guarantee acceptance into our Bank Draft Program. Unless otherwise notified, the Bank Draft Program will be available for your use in approximately 7-10 business days.

If your account becomes due before the enrollment process has been completed, a one time electronic draft can be requested by calling the Customer Information Center at (256) 535-1255 or payment may be made by other payment options available. If your bank information changes, a new enrollment form will need to be filled out and returned with a voided check. Questions can be directed by email at [custserv@hsvutil.org](mailto:custserv@hsvutil.org) or by phone at (256) 535-1255 or toll free 1-866-478-8845.

**HUNTSVILLE UTILITIES**  
Attn: Customer Information Center  
P.O. Box 2048  
Huntsville, AL 35804  
Via Fax 256-535-1437

*To whom it may concern: I \_\_\_\_\_  
authorize an additional \$ \_\_\_\_\_ drafted  
from my account as a **Project Share** donation.  
(currently available only to monthly subscribers)*

**[www.hsvutil.org](http://www.hsvutil.org)**

## Bank Draft Authorization

Depositor 's Name: \_\_\_\_\_

Please select Type of Bank Account: \_\_\_\_\_ Checking \_\_\_\_\_ Savings  
(money market or asset accounts are not qualified for drafting)

Bank Name: \_\_\_\_\_ Bank Address: \_\_\_\_\_

Bank Routing Number \_\_\_\_\_ Bank Account Number: \_\_\_\_\_

As a convenience to me, I hereby request and authorize you to pay and charge to my account drafts drawn on my account by the City of Huntsville Utilities to its own order. I agree that this authorization will remain in effect until revoked by me in writing, a copy of which revocation shall be sent to the City of Huntsville Utilities. The City of Huntsville Utilities reserves the right to cease collection of my account under this authorization after written notice has been forwarded to me, the customer named below.

This authorization allows for either **(Please indicate selection)**

**Automatic monthly drafting or**

**Web/Phone draft as initiated by the account holder via our website or by telephone at 532-8222.**

If I choose to change from the type of bank draft indicated, I will notify the City of Huntsville Utilities. I further agree that your rights in respect to each draft shall be the same as if such draft were signed personally by me.

\*I agree to pay a service fee to Huntsville Utilities for any draft returned from any financial institution.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_  
(customer)

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Utilities Customer Account Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

**[www.hsvutil.org](http://www.hsvutil.org)**