

DATE: _____

BANK DRAFT APPLICATION

NAME: _____ (LAST)
(FIRST) (MI)

MAILING ADDRESS

SERVICE ADDRESS

CUSTOMER WATER ACCOUNT NUMBER: _____ - _____

BANK NAME: _____

BANK ACCOUNT NUMBER: _____

BANK ROUTING NUMBER: _____

BANK'S ADDRESS: _____

BANK'S PHONE NUMBER: _____

CUSTOMER SIGNATURE: _____

PHONE NUMBER: _____

~~~~~PLEASE ATTACH A VOIDED CHECK HERE~~~~~