This authorizes the City of Belton and my financial institution to automatically pay my monthly water/sewer bill out of my checking or savings account. I agree to all of the terms of authorization. I understand that my first bill will be a pre-note to test the draft, and bank drafting will start with the following bill.

City of Belton Water Departm	nent Account Num	ber:
Billing Cycle and Route:		
Your name (as it appears on y	our water account	):
Service Address:		
Home Phone #		Work Phone #
Bank Account Number:		Checking Account Savings Account
Bank Routing Number:		
Please attach a voided check		
Name of Bank:		
Bank Address:		
City:	State:	Zip Code:
Signature:		Date:

Please attach voided check here