Automatic Bank Draft Authorization

Complete and return this form to City of Independence Utilities Customer Service at 11610 E. Truman Road, Independence, MO 64050. For account verification, please enclose a **voided check or photocopy of check** on the bank or other financial institution account from which you would like future utility bill payments to be deducted.

Please indicate below your City Utilities account number (as shown on your bill) and the street address where utilities are used.

_____
Utility Account Number

_____
Street Address

I authorize my bank to deduct monthly City Utilities bill payments from my check or savings account. I understand that I am in full control of my payment. If at anytime I decide to discontinue or change my Automatic Bank Draft, I will notify City of Independence Utilities.

Phone numbers: _____ (Home)
_____ (Work)

Date: _____

_____
Checking or savings account owner's signature

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