Murray Municipal Utilities

BANK DRAFT AUTHORIZATION

Automatic bank drafting from your checking or savings account assures that your bill is paid in full and on-time every month, even if you are out of town. This convenient recurring process is free.

How Do I Begin the Process?

To become a bank draft customer, we need two things: the completed bank draft authorization form on the next page and a "voided" check from your checking account or a withdrawal slip from your savings account. We will work with your bank to draft your checking or savings account each month.

When Will My Account Be Drafted?

The initial set-up for the bank draft will take approximately two weeks. Please continue to pay your bill as normal until your bill states "BANK DRAFT – DO NOT PAY". After enrollment in the program, your account will be drafted for the exact amount of your bill on the due date of your account. You will receive a monthly statement by mail on which your bank draft confirmation message appears.

What Happens if I Have Questions About My Bill?

If you have a question about your gas/water/sewer/sanitation bill, call Murray Municipal Utility Customer Service Center at 270-762-0300.

What Happens if There is Not Enough Money in My Account?

The automatic bank draft will be presented to your bank once for processing. If your financial institution does not pay the draft because of insufficient funds and returns it to the Authority, your account will be charged a return check fee and processed in the same manner as an insufficient funds check. If a payment is declined by your financial institution on more than one occasion it will be left up to the discretion of the Murray Municipal Utilities staff to remove the account from bank draft.

How Do I Cancel My Participation?

If you decide to discontinue participation in the bank draft program, you may fill out a bank draft cancellation form and submit it to the Murray Municipal Utility Customer Service Center.
By Mail: P.O. Box 466 Murray, KY 42071
By Fax: 270-761-0175
By Email: murraycsc@murrayky.gov

Murray Municipal Utilities

BANK DRAFT AUTHORIZATION FORM

Please complete the following information
Section A

☐ Check here if you are a current bank draft customer and need to submit a change of information.

Customer Name: _____

Customer Account #: _____

Customer Service Address: _____

Customer Mailing Address: _____

Customer Phone #: _____

Place of Employment: _____

Section B

Murray Municipal Utilities is authorized to debit my (check one)
☐ **Checking Account or** ☐ **Savings Account**

Bank Name _____

Bank Routing Number _____

Bank Account Number _____

for my gas/water/sewer/sanitation charges on the monthly due date of my account and I have included a voided check or savings withdrawal slip for this purpose. I further understand that this authorization is in effect until Murray Municipal Utilities is notified that I or an authorized person no longer desires this service, allowing them reasonable time to act upon my notification. I also understand that if corrections to my account are necessary, they will be reflected on the next billing. I understand that non-payment due to insufficient funds in my account will be processed by my financial institution and the Authority in the same manner as an insufficient funds check, and that I may be charged an insufficient funds fee ($50) by both. I understand that this authorization is non-negotiable and non-transferable.

Authorized Signature _____ Date _____

Authorized Signature*_____ Date _____

*If the name on the bank account is different than the customer service name both persons must sign this form AND an "Authorized Person" form must be completed and attached. Also, if at any time the draft needs to be cancelled _either party can cancel_ by filling out a Bank Draft Cancellation Form.

Office Use Only Month change is effective (if applicable)_____ Clerks Initials_____

Murray Municipal Utilities
AUTHORIZATION FORM

Authorized Persons on Service Account

Name of Service Customer:_____

Service Address:_____

Service Account #:_____

Authorization is being given to :

Name:_____

Address:_____

Phone #:_____

SS# or DL#(used for verification purposes):_____

Relationship to Service Account Holder (check one of the following):

☐ Parent   ☐ Guardian   ☐ Other (please list):_____

By signing this agreement I am authorizing the above individual(s) to have access to my account with Murray Municipal Utilities. This shall include but not be limited to the following: Service status and information, billing and payment questions, and bank information for purpose of setting up or taking off of bank draft. I also understand that the above stated individual shall be allowed access until I remove them.

Signature (service customer)_____ Date:_____

Signature (authorized user) _____ Date:_____