

**Northwest Cass County Water Resource District**

**BANK DRAFT AUTHORIZATION FORM**

P.O. Box 412182

Kansas City, MO 64141 - 2182

Phone: (816)741-7882

Fax: (816)741-2330

**\*\*ATTENTION: You will need to include a voided check from the account that you want drafted.**

**ACCOUNT INFORMATION**

Account Name: \_\_\_\_\_

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

Telephone Number: \_\_\_\_\_

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

**BANKING INFORMATION (Checking Account)**

Select the Account Type:  Checking  Savings

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

Account Number: \_\_\_\_\_

ABA Routing Number: \_\_\_\_\_

**Start with Bill Due:** \_\_\_\_\_

I authorize Northwest Cass County Water Resource District to charge (draft) the payment of my monthly bill and bank listed above to charge the drafts to my account. I understand that this authorization will be in effect until I notify Northwest Cass County Water Resource District and my bank, in writing, that I no longer desire this service. I also understand that if corrections in the debit amount are necessary, it may involve an adjustment (credit or debit) to my account.

I have the right to stop payment by notifying my bank before the account is charged. If an erroneous draft entry is charged against my account, I have the right to have the amount of the entry credited to my account.

I understand that Northwest Cass County Water Resource District may impose a late payment and delinquent fees in the event the debit entry is not paid by the bank for a valid reason. The electronic drafts can be cancelled at any time by either party.

Signature

Date

**IMPORTANT:** Did you include a voided check?