



Utility Billing Bank Draft Authorization Form

Utility Account # _____ CID # _____ Date _____

Customer Name _____
(as it appears on bank account)

Service Address _____

Phone Number _____ E-Mail Address _____

Want to get paperless billing? () Yes, I would like to go paperless.

I authorize the City of Ogden to withdraw from the bank account indicated below my monthly utility bill. The payment will occur on or about the due date of the bill. I also understand I may discontinue this authorization at any time by giving written notice to the Ogden City Utility Billing Office. I realize this information will be used solely for the purpose of utility bill payments.

Financial Institution _____ Bank Account Number _____

() Checking () Savings

Signature _____

Please return this completed form with a voided check or account verification letter from your bank to:

Ogden City Utilities
133 W. 29th Street
Ogden, UT 84401

E-mail to: Utilities@Ogdencity.gov

This authorization must be attached to a voided check or account verification letter from your bank

INTERNAL USE ONLY		
	Name/Phone Number	Date/Time of Verification
Verified Info With:		
Notes:		
Verified at City by Fiscal Operations Staff:	Print Name	Signature