## **Bank Draft Authorization Form**



This form authorizes the City of Raymore and my financial institution to automatically pay my monthly water bill out of my bank account. I agree to all terms of the authorization.

## IMPORTANT: A voided check must be attached to this form.

Payment will be drafted two (2) business days before customer's final due date:

- Zone 1 & 2 final due date is the 7th of the month.
- Zone 3 & 4 final due date is the 11th of the month.

City of Raymore Water Departmer	nt Account Number:		
Name as it appears on the accoun	t:		
Address:			
City:			
Home Phone:	Work Phone:		
Bank Account Number:			
Bank ABA Routing Number:			
Bank Name:			
Address:			
City:	State:	Zip Code:	
Signature:		Date:	
lf you have questions, call th	ne City's water/sewer	utility clerks at 816-331-518	2.
Check this box and sign t	to cancel ACH drafting		
Signature:		Date:	-

View your bill online by visiting www.Raymore.com and click on Pay a Utility Bill. From there you can create an account and view past bills and other information. Sign up to recevie email updates from the City by visiting www.Raymore.com/Email.