

WARREN COUNTY PUBLIC UTILITIES DEPARTMENT  
P. O. BOX 577  
WARRENTON, NC 27589

BANK DRAFT APPLICATION

ANY CHANGES TO THIS DRAFT MUST BE SUBMITTED IN WRITING PRIOR TO THE 1ST OF EACH MONTH. IF FAILURE TO NOTIFY THIS OFFICE OF CHANGES PRIOR TO THE 1ST RESULT IN INSUFFICIENT FUNDS TO COVER THIS DRAFT, A \$25.00 NSF CHARGE WILL BE CHARGED TO YOUR ACCOUNT. THE AMOUNT WILL BE DEDUCTED FROM YOUR ACCOUNT ON OR AFTER THE DUE DATE DEPENDING ON THE DATE OF INTER BANKING TRANSACTIONS. IF THE DUE DATE FALLS ON A SATURDAY, SUNDAY OR BANKING HOLIDAY, THEN THE FOLLOWING BUSINESS DAY WILL BE CONSIDERED THE DUE DATE FOR THE DRAFT. YOU WILL CONTINUE TO RECEIVE A COPY OF YOUR BILL EACH MONTH INDICATING THE AMOUNT TO BE DRAFTED. IF YOUR BILL DOES NOT INDICATE THAT THE AMOUNT WILL BE DRAFTED, PLEASE PAY FROM THE BILL.

Customer's Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Physical Address of Property: \_\_\_\_\_

\_\_\_\_\_

Daytime Phone Number: \_\_\_\_\_

Account Number listed on Water Bill: \_\_\_\_\_

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

Address of Bank: \_\_\_\_\_

Check one of the following:

Savings Account

Checking Account

Date draft is to be Active: \_\_\_\_\_

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

Bank Account Number to be Drafted: \_\_\_\_\_

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( ) I wish to participate in Warren County Public Utilities' bank draft program. For account verification purposes, I have attached a voided check to this application.

\_\_\_\_\_  
Customer's Signature

\_\_\_\_\_  
Date

***"This institution is an equal opportunity provider and employer."***