



Water Department / 104 E 5th Ave / PO BOX 928 / Emporia, KS 66801 / 620-343-4244 / utilities@emporia-kansas.gov

Information to enroll in automatic bank draw:

Bank Name: _____

Bank Phone Number: _____

Checking Account Number: _____

ABA/ Routing Number: _____

Name on Water Account: _____

Water Account Number: _____

Service Address: _____

I authorize the Financial Institution named below to pay my accounts receivable bill by charging each payment to the account specified by me. I agree that each payment shall be the same as if it were an instrument personally signed by me. This authority is to remain in effect until revoked by me in writing. A returned check fee will be charged for all non-sufficient funds.

Signature _____

Date _____

Return by:

Mail: Water Department – PO BOX 928 – Emporia, KS 66801

Drop box: Across from office in South Parking lot

Email: utilities@emporia-kansas.gov

Fax: 620-343-5668

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Attach a voided check or deposit slip with account and routing numbers shown