City of Moore

AUTHORIZATION FOR AUTOMATED BILL PAYMENT PROGRAM
City of Moore Utilities

Please return this form, along with a voided check to: City of Moore, 301 N Broadway Moore, OK 73160.
For additional information call 793-5032.

Checking Account Draft

Financial Institution: _____

_____
Bank Routing Number Checking Account Number

Important: You must return a voided check with this form to ensure accurate processing.

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Credit/Debit Card Draft

Name on Credit/Debit Card:_____

Credit/Debit Card Number:_____Expiration Date:_____

Name: _____
(As it appears on your water bill- please print)

Service Address: _____

Utility Account Number: _____

Primary Telephone Number: _____

1. Revocation: This authority is to remain in effect until revoked by customer, company, or financial institution. Customer must notify the City of Moore to discontinue automated payment at least five (5) business days prior to scheduled draft.
2. Stop Payment: You have the right to stop payment of a charge by notifying your financial institution up to three (3) business days prior to charging your account.

I authorize the City of Moore to send all future billing electronically: **Yes No**

Email address for electronic billing:_____

(circle one)
I authorize the City of Moore to draft my: Checking Account Credit/Debit Card

_____ _____
SIGNATURE (REQUIRED) **DATE**