

Walden's Ridge Utility BANK DRAFT AUTHORIZATION

I, the customer, hereby request, authorize and agree that Walden's Ridge Utility District (WRUD) shall cause payments owed by me to WRUD to be debited electronically from my account, as described below, without my personal written signature. If I fail to have adequate funds in my bank account at the time of the draft, I understand that I will automatically be removed from this plan and the bill plus a service charge will be due immediately. I have the right to cancel my participation in the Bank Draft Plan by notifying WRUD and by giving WRUD and my banking institution a reasonable amount of time to process my request. WRUD and my banking institution reserve the right to end my participation in the Bank Draft Plan.

ACCOUNT INFORMATION

Name as shown on your bank account

Home (Cell) Telephone

Name on WRUD account (if different from above)

Work Telephone

Your home address

WRUD Account Number

Signature of Customer

Date

**RETURN THIS FORM TO
WALDEN'S RIDGE UTILITY DISTRICT
3900 TAFT HIGHWAY
SIGNAL MOUNTAIN, TN 37377**

**This completed form must be received in our office by
the 1st of the month prior to your billing due date.**

PLEASE ATTACH A VOID CHECK OR A COPY OF A CHECK MARKED VOID HERE