

Verona Special Utility District

408 W. FM 545 Suite 400
Blue Ridge, TX 75424
972-752-4016 Fax 972-752-4029
E-Mail: veronawater@aol.com

ACH BANK DRAFT

DATE _____

NAME ON ACCOUNT _____

UTILITY ACCOUNT NUMBER _____

PHONE # _____

E-MAIL ADDRESS _____

I, the undersigned, authorize CapTex Bank to draw a monthly draft on my account for my current utility bill and services furnished to me by Verona Special Utility District, and I do hereby authorize you to honor such draft, until such time as I revoke this order.

Customer Signature _____

Address _____

Name of Financial Institution _____

Bank Routing Number _____

Customer's Bank Account Number _____

Date of Withdrawal will be around the 8th of the month.