



Bank Draft Authorization and Change Form

RUSTON
Customer Service
(318) 251-8675

CUSTOMER INFORMATION

Name: _____ Date: _____
Service Address: _____ Account No.: _____

FINANCIAL INFORMATION

Name of Bank: _____ Account No.: _____
City/State: _____ Routing No.: _____
9 Digit Number on Bottom Left of Check

REQUEST TYPE

- New Bank Draft Authorization:
- Change to Existing Authorization:
- Remove Bank Draft Authorization:

BANK DRAFT AUTHORIZATION AGREEMENT

Please note that payment is due by the due date noted on the bill. If for any reason the bank draft is returned not paid, the customer will be responsible for making payment to the City of Ruston by the due date. If payment is not received by the due date, a ten percent penalty will be assessed to the utility account. If payment is not received ten days after the due date services will be subject to disconnection. After two returned bank drafts, the customer will be removed from bank draft and will be responsible for making payment by cash or money order.

Written notification of any changes must be received by the City of Ruston Customer Service Office at least ten (10) business days prior to the effective date.

I authorize the City of Ruston and the financial institution listed above to initiate electronic entries to my account. This authority will remain in effect until I have cancelled it in writing.

Applicant Signature: _____ Date: _____

FORM INSTRUCTIONS

Completed authorization forms must be delivered to the City of Ruston Customer Service Center located on the south side of City Hall at 401 N. Trenton Ave. A Customer Service representative will review the authorization form and determine effective date. Positive proof of identification and a voided check will be required.

OFFICE USE ONLY

Date Received: _____ Entered By: _____ Date Entered: _____ Date Effective: _____