Joint Utility Office
505 Sims Street
Truth or Consequences, NM 87901

OFFICE: (505) 894-6671
FAX: (505) 894-0363

UTILITY BANK DRAFT AUTHORIZATION

_____
Utility Account Number(s)

_____
Customer Name

_____
Customer Address

_____
Customer's Home Phone No. / Day Time Phone No.

Account Information

Please contact your bank for this information. Incorrect information will delay Utility Bank Draft processing. Please attach a copy of a voided check.

Account Number

Checking ☐ Savings ☐
Type of Account(Check One)

Name and Address of Financial Institution

_____

_____

_____

Routing Number

			-				-				

Bank's Phone Number

4. Customer Authorization

I hereby authorize the City of Truth or Consequences to pay and charge to my (our) account all bills for utilities and miscellaneous services rendered against the undersigned by the City of Truth or Consequences. I understand this authorization will remain in force until the City has received written notification of termination or change and allow the City sufficient time to process same notification. I understand that I will be charged a $25.00 NSF fee if funds are not available when the draft is drawn (around 10 days from billing date).

_____ _____
Customer Signature Date

RETURN FORM TO CITY OF TRUTH OR CONSEQUENCES, UTILITY OFFICE