

**City of Bluefield, Treasury Department**  
200 Rogers Street  
Bluefield, WV 24701  
Phone: 304-327-2401 / FAX: 304-325-6494

**Bank Draft Application**

Please Note: The withdrawal from your account will begin the month after the form is submitted. If there is a balance on your account you will need to pay that amount at the time the form is submitted. The AUTO PAY will be deducted on the 5<sup>th</sup> of the month. After this takes effect, you will receive a monthly bill that will indicate AUTO PAY. DO NOT pay the monthly bill that is marked as AUTO PAY because it will be deducted automatically from your designated account.

Customer/Account Number: \_\_\_\_\_

Customer Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

\_\_\_\_\_

Telephone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Bank Routing Number: \_\_\_\_\_

Bank Account Number: \_\_\_\_\_

**Please attach copy of VOID check or deposit slip.**

**Amount to withdraw:** \_\_\_\_\_ **full amount due each month**  
\_\_\_\_\_ **other: \$** \_\_\_\_\_ **each month**

By signing this application, you agree to allow the City of Bluefield to automatically draft your bank account to pay your City Service Fees. Your account will be drafted on or about the 5th of each month. If your bill is more than the amount selected above, you will be required to pay the excess amount of your bill by other means if you wish to avoid late payment penalties. If the bank declines your draft for any reason, you will be subject to bad check fees.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

If you would like to receive your monthly city service fee invoice by email instead of through the US Postal service, please indicate below and be sure to list your email address above.

\_\_\_\_\_ Yes, I would like to receive my bill via email.

\_\_\_\_\_

\_\_\_\_\_ Please remove me from email invoicing. Effective \_\_\_\_\_

\_\_\_\_\_ Please remove me from auto draft. Effective \_\_\_\_\_

Date: \_\_\_\_\_ Signature: \_\_\_\_\_