



## Bank Draft Authorization

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Thank you for being a City of Rock Hill Utility customer. As a convenience, we offer automatic bank debits for utility accounts. If you would like to utilize this service, simply fill out this form, attach a voided check from your checking account and mail to: City of Rock Hill Collections, P.O. Box 11706, Rock Hill, SC 29731. If you have any questions, please call (803) 325-2500.

### Bank Draft Enrollment Form

City of Rock Hill Account Holder Name: \_\_\_\_\_

City of Rock Hill Account(s) Number: \_\_\_\_\_

Telephone: Home: \_\_\_\_\_ Work: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

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

Bank Name: \_\_\_\_\_

### Please read this statement, and then sign to authorize:

As a convenience to me, this is my authorization to the City of Rock Hill to initiate debit entries upon my bank account payable to the City of Rock Hill for itself in payment of any bills for utility services I may incur as a customer of the City of Rock Hill. I agree that any such debit presented by the City of Rock Hill which is dishonored by the bank for insufficient funds or due to a closed account will bear the same consequences as though it were a personal check made, drawn and presented by me in payment of the bill for utility services. This authorization may be terminated at any time either by me or the City of Rock Hill for any reason, with or without cause, upon written notice to the other.

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### ACCOUNT HOLDER SIGNATURE and DATE

Please mail completed form with a **VOIDED CHECK** to:

**City of Rock Hill Collections**  
**P.O. Box 11706**  
**Rock Hill, SC 29731**

Or

Scan documents and e-mail to [bankdrafts@cityofrockhill.com](mailto:bankdrafts@cityofrockhill.com) .

**Note: If you have more than one City of Rock Hill account and wish to have drafts on all accounts, please list all account numbers on the form you return. If your bank account number changes or bank merges, please notify us immediately. Your bill will be drafted 13 days from the day it is billed each month.**

**DON'T FORGET TO INCLUDE A VOIDED CHECK WHEN YOU RETURN THIS FORM!**