

Regional Utilities

operated by



Florida Community Services of Walton County Corp

4432 US Highway 98 East • Santa Rosa Beach, FL 32459

www.regionalutilities.net • 850-231-5114 • fax 850-231-4924

AUTHORIZATION FOR ELECTRONIC TRANSFER OF FUNDS

Name: _____ Phone # _____

Mailing Address: _____

Regional Utilities Account # _____

Service Address: _____
Authorization form required for each utility account

Please check one: Checking () Savings ()

I authorize Regional Utilities to debit my bank account for the total due on my utility account at the time of the scheduled monthly draft. I understand the draft will begin the 15th of month after authorization form is received and monthly drafts will occur on the 15th or the following business day should the 15th fall on a weekend or holiday. I understand that this authorization will remain in effect until I notify Regional Utilities either by phone (850-231-5114) or in writing (mailed to 4432 US Hwy 98 E, Santa Rosa Beach, FL 32459) that I wish to revoke this authorization. Regional Utilities requires at least a 5-day notice prior to the draft date to cancel this authorization. I understand that after two consecutive ACH returns on the account, the ACH will be removed from the monthly draft. Under penalty of perjury, I attest that I am an authorized signer on this account or otherwise have authority to act on this account.

A voided check is required.

Bank ABA Routing # _____

Bank Account # _____

Bank Name _____

Customer Signature: _____ Date: _____

Office Use Only:

Date Received: _____ Draft # _____ Received By: _____