

**AUTOMATIC PAYMENT WITHDRAWAL**  
**STUART MUNICIPAL UTILITIES**  
(FIRST STATE BANK CUSTOMER ONLY)

Date of Agreement: \_\_\_\_\_ Account #: \_\_\_\_\_

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

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

Phone #: \_\_\_\_\_

I do hereby agree to let the Stuart Municipal Utilities withdraw from my Bank Account my utility bill each month on the 8th of every month. I also understand that my information provided to the Stuart Municipal Utilities will be kept confidential.

The Bank Account Number and type of account that I wish to have my Utility Bill payment withdrawn from is:

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

	Checking
	Savings
	Other: _____

By signing below, I agree to let the Stuart Municipal Utilities withdraw from my Bank Account my Utility Bill payments starting on the date above. I also understand that if I have received my Utility Bill before signing this Agreement, that the Utility Bill must be paid by me regularly until the next month when the Stuart Municipal Utilities will start withdrawing my Utility Bill payment from my Bank Account:

\_\_\_\_\_ Customer Signature \_\_\_\_\_ Date

(For Utility Use Only)

Date Entered in System: \_\_\_\_\_ Date of First Withdrawal: \_\_\_\_\_