



Bank Drafting Application

To authorize automatic deductions from your checking or savings account, just:

- *Complete this form;*
- *Include a blank, voided check; and*
- *Mail it to us at the address below – it's that easy.*

Account Number: _____

Name on Your City of Gillette Utilities Account: _____

Service Address: _____

Telephone Number: _____

Cellular Telephone Number: _____

Name of Financial Institution: _____

Checking or Savings

Bank Routing Number: _____ Account Number: _____

I authorize the City of Gillette Utilities to instruct my Bank/Financial Institution to make my payments from the account listed above. I understand this authorization will remain in full force and effect for this address until the City of Gillette Utilities department receives written notification from me of its termination, allowing for reasonable time to act on my request.

Customer Signature: _____ Date: _____

Witness Signature: _____ Date: _____

Please Send To The:

*City of Gillette
Attn: Customer Service
PO Box 3003
Gillette, WY 82717-3003
(307) 686~5206
www.ci.gillette.wy.us*